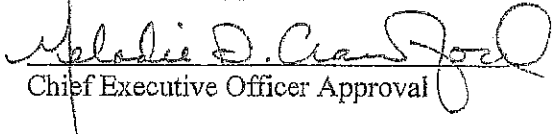


Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**FY 10-11 and FY 11-12 310 Board 2-Year Plan:**

Name of 310 Board: Mental Health Board of Chilton and Shelby Counties, Inc.

County(s) Served: Chilton and Shelby Counties

Population(s) served: Mental Illness, Intellectual Disabilities, and Substance Abuse

**Vision Statement:** We will provide the highest quality of service to individuals with mental illness, intellectual disabilities and substance abuse disorders and their families as resources are available and we will strive to be the premier mental health center in the state.

**Mission Statement:** The Mental Health Board of Chilton and Shelby Counties, Inc. (CSMHC) is committed to providing the highest quality of behavioral healthcare services to residents of Chilton and Shelby Counties whose lives are impacted by mental illness, intellectual disabilities, substance abuse and/or emotional disturbance. Our mission is to assist these individuals in their recovery process. Program success of individuals with mental illness, intellectual disabilities, and substance abuse will be evidenced by improvements in social functioning, independent living functions and absence of, or reduction in intensity and/or frequency of symptoms. We strive to provide easy access to services that are medically necessary, clinically appropriate, effective, efficient and safe, as resources are available. These services will be delivered in the least restrictive environment that maintains safety, produces optimal clinical outcomes, results in high client satisfaction and increases the clinical proficiency of staff.

**I. Plan Development:**

**A. Describe your established planning cycle.**

The Board conducts an Annual Public Board Meeting to receive input from citizens of Chilton and Shelby Counties. The input is targeted towards current and needed mental health services in our local areas as well as the State of Alabama. This information is necessary in order to facilitate a local needs assessment summary which is utilized in developing the Board's 2-Year Plan. The Board meets annually to review 2-year goals and assess needed changes and the sustainability of current services. The Board also reviews the Agency CQI Plan and the S.W.O.T. analysis developed by the Leadership Team when applicable. Family and Client survey results are reviewed as well as other stakeholders' input that has been received and submitted. The Board reviews the fiscal operations and the policies and procedures of the agency. The Prevention Staff and Management Team facilitate a Community Prevention Needs Assessment which is also reviewed by the Board annually. Information from the Needs Assessments conducted by the Chilton County and Shelby County Children's Policy Councils, that is relevant to the Board's mission, is also included in the Board's planning process. Information compiled from the agency's involvement in the State Regional Acute Care and Bryce Extended Care

Planning Process was also considered in developing the Board's 2-Year Plan. Our agency also utilized information from the Local, Regional and State DMH planning process.

**B. What are the roles of the key stakeholders?**

We partner with our stakeholders to provide continual improvements in our service delivery system within our local community. We strive to continually improve our system of care by developing these local partnerships. Our key stakeholders provide input into the development of agency goals.

Clients, families, state and community agencies, state and local government officials, community coalitions, community transportation task force groups, advocacy groups, children's policy councils, judicial and correctional systems, healthcare systems, education teams and certification teams make up the stakeholders utilized by our Board during plan development.

**C. How is the plan implementation monitored and evaluated?**

Plan implementation is achieved through the use of the following resources which also allow us to monitor and implement needed changes:

- Quarterly CQI meetings
- Quarterly CQI reports to the Board
- Monthly fiscal operations review with the Board
- Review of client and family grievances
- Yearly client and family surveys
- Center wide suggestion boxes located in each office and reviewed by CEO is used to receive input daily from clients/families/caregivers and staff
- Weekly random outpatient surveys are given to clients regarding their primary therapist care
- Certification Site Visit Results
- Advocacy Monitoring Reports
- Regularly scheduled program staff meetings
- Feedback from attendees of Annual Board Meetings
- Monthly Corporate Compliance Audits
- Monthly Leadership Team Meetings

**II. Plan Components: FY 2010 to 2012**

**A. Populations**

**1. Describe the population(s) served.**

Children, adolescents, adults and geriatrics affected by mental illness, intellectual disabilities, and substance abuse disorders and prevention and education services for at risk youth and their families.

**2. Describe the demographics.**

See Attachment A

**B. Community Needs/Services Priorities**

**1. How do you assess needs?**

*Please see information included in the planning cycle and key roles of stakeholders as earlier stated in the plan. Examples include: Input received from clients, families, legal representatives, staff, advocates and certification teams. Feedback from attendees of the Annual Board Meetings, requests and suggestions from community, legal and government agencies and community based assessments.*

**2. What are the greatest area(s) of unmet need(s)?**

- Equitable state and local funding for CSMHC to hire adequate workforce and secure facilities to serve the expanding needs/expectations of clients and their families in the community.
- Adequate funding to CSMHC for the continuation of current services and supports from state and local government.
- Funding for Capital Improvements for CSMHC
- Funding for expansion of technology and Electronic Medical Records System for CSMHC and an IT Director
- Public Community Transportation
- Acute Care Inpatient Beds
- Expansion of affordable and supportive housing for independent living for MI & ID clients
- Residential treatment for children, adolescents, transitional youth and geriatric population
- Expansion of Adult and Children Evidenced Based In-Home Treatment Teams
- Continuum of services for individuals with developmental disabilities and substance abuse issues
- Expansion of community client and family support groups

**C. Services/Supports – Describe the services/supports provided and needed expansions.**

Service/Supports Currently Provided by CSMHC:

*See Attachment B which contains the CSMHC Program Descriptions. Program Descriptions are also located in the CSMHC Policy and Procedure Manual.*

Needed Expansions: *The following list includes several of the needed expansions identified during the CSMHC 310 Board Annual Public Meetings/Community*

*Needs Assessment Meetings and the entire planning cycle but funding is currently unavailable:*

- Expansion of all Children Services
- Public Transportation for all clients that qualify and funding to purchase additional contract transportation slots for identified clients attending the day programs, from ClasTran and Chilton County Transit
- Vocational Supports for MI, ID and SA Adults
- Supportive Apartments for MI and ID Adults
- ID Retirement Program
- Affordable Assisted Living for aging MI/ID population
- SA Intervention Treatment Group for Adolescents
- Expansion of Evidenced Based In-Home Supports for MI and ID Adults, Adolescents and Children
- Development of ID and MI Respite Services
- MI Community Acute Care Residential Beds
- MI Community Group Homes
- Expansion of MI,
- ID and SA Case Management Services
- Community Drop-In Center for MI Adults
- Services for individuals who do not meet Medicaid Waiver eligibility
- Equitable state and local funding for CSMHC to hire adequate workforce and secure facilities to serve the expanding needs/expectations of clients and their families in the community.
- Adequate funding to CSMHC for the continuation of current services and supports from state and local government.
- Funding for Capital Improvements for CSMHC
- Funding for the expansion of technology and Electronic Medical Records System for CSMHC and IT Director

**D. Resource Development & Allocation – Describe current funding resources and future funding resources for planned expanded capacity (i.e. budget documents), if applicable.**

**1. Current Sources of Funding for CSMHC:**

- DMH/ID/SA
- Medicaid/Medicare
- Private Pay
- Third Party Insurers
- Chilton County Commission
- Chilton County United Way
- Shelby County Health Foundation
- Alabama Department of Youth Services
- Contributions and Fundraisers
- Shelby County Community Correction Corporation

**2. Future Sources of Funding:**

*Same as Current Sources of Funding*

*Refer to Attachment C which is a copy of the CSMHC FY 08-09 Financial Audit*

**III. CSMHC 310 Board Goals/Objectives: FY 2010-2012**

**A. Increase Revenues**

1. Increase billing and accuracy
2. Develop & expand SA Programs
3. Expand MI Group Therapy opportunities
4. Improve client satisfaction
5. Improvements in collections and procedures in the outpatient offices
6. Consistently monitor the attainment of productivity quotas for designated staff
7. Expand ID Programs
8. Continue and improve partnerships with other community agencies to expand services and funding opportunities
9. Improve technology and complete the implementation of Electronic Medical Records System and hire an IT Director
10. Advocate for adequate state and local funding

**B. Staff Retention**

1. Continue to increase and improve morale by expanding Staff Appreciation Activities
2. Improve Staff Training Program and New Employee Orientation
3. Improve Performance Appraisal System
4. Continue to improve salaries and benefits as funding permits
5. Streamline work tasks
6. Improve technology and implement Electronic Medical Records System as funding permits
7. Continue to make improvements in the agency facilities, equipment and training materials to provide efficiency and improvements in job performance
8. Continue surveying employees regarding retention and supervision
9. Redefine service population in all three service divisions in order to improve quality verses quantity of services and if necessary, implement waiting lists

10. Improve and enhance on-the-job training opportunities for new employee
11. Improve interagency communication across all programs.
12. Expand HR Department

#### **C. Service Expansion**

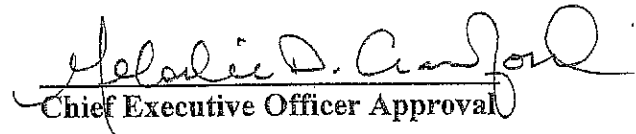
1. Assist State NAMI officials in establishing NAMI Support Groups in Chilton County and provide support to the new NAMI group in Shelby County
2. Develop and provide Adolescent Substance Abuse Outpatient Groups in Chilton and Shelby Counties
3. Expand the MI Peer and Community Support Programs
4. Expand the MI Permanent Supportive Housing Programs
5. Expand ID Personal Care Services
6. Expand and Improve the SA Division Programs

#### **D. Improve and Promote Public Awareness of Agency**

1. Continue to utilize Prevention Staff
2. Improve Consultation and Education Program
3. Increase utilization of community publications to increase public awareness and to promote the reduction of the inappropriate Mental Illness stigma within the community

Date of Board Approval: 06-09-04

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Drug Program

**Definition**

Psychotropic medications are provided to clients at low cost (handling fee) on a temporary basis.

**Location**

110 Medical Center Drive, Clanton, AL 35045

**Hours of Operation**

Medication may be ordered Monday through Friday 8:00 a.m. until 4:30 p.m. Prescriptions are typically filled one night per week. Any variations to the normal schedule will be posted in each facility.

**Program/Service Components**

Services provided include:

- Medication counseling by a registered pharmacist
- Medication monitoring and education by a registered nurse
- Medications provided through the Indigent Drug Program funded by DMH.
- Medications provided through Compassionate Needs Programs sponsored by pharmaceutical companies

**Admission Criteria**

*Indigent Drug Program* admission criteria includes:

- Resident of Chilton or Shelby county
- Active clinical client
- Seen by a licensed physician in the last six months
- Current (within past year) medical history form completed
- Other medication coverage not available (e.g. other insurance policies, etc.)
- Have a mental illness disorder diagnosed by a licensed physician
- Meet at least one of the following clinical criteria:
  - Has a history of DMH/ID supported inpatient, public residential, or court ordered treatment at a local hospital or Designated Mental Health facility result of an Axis I mental illness diagnosis.

- Without outpatient Indigent Drug Program funded medications the client would become at risk of needing DMH/ID supported inpatient or public residential treatment as a result of an Axis I mental illness diagnosis. "At risk" is defined to mean meeting both Section I of target population criteria and at least one of the following four criteria:
  - a. The respondent is unable to make a rational and informed decision as to whether or not treatment for mental illness would be desirable.
  - b. As a result of mental illness, the respondent poses a real and present threat of substantial harm to self and/or others.
  - c. The person has a diagnosis of a psychotic disorder or history of such a diagnosis.
  - d. The client meets the DMH/ID criteria for Seriously Emotionally Disturbed Child.
- Client must meet one of the following financial criteria:
  - Individual income less than \$7,500/year (if an adult child is living with his Family, only the adult child's income will be considered)
  - Family income less than \$11,000/year. Family is defined as a group bound in a legal dependent relationship (e.g., spouse, dependent child, adult child claimed for income tax purposes)
  - If two or more family members (as defined above) are clinically eligible for the Indigent Drug Program, the maximum family income is \$15,000/year. However, if application of the family income limits results in family's begin ineligible for the Indigent Drug Program, each client will then have his/her income measured against the individual income limit of \$7,500/year or less to determine eligibility for the program
  - Client must supply income verification from on the following sources: DHR, Social Security, State Employment, and/or employer.

*Compassionate Needs Program* admission criteria includes:

- Resident of Chilton or Shelby county
- Active clinical client
- Seen by a licensed physician in the last six months
- Current (within past year) medical history form completed
- Other medication coverage not available (e.g. other insurance policies, etc.)
- Have a mental illness disorder diagnosed by a licensed physician
- Other eligibility requirements as determined by each individual pharmaceutical company

#### **Continued Stay Criteria**

Expected length of stay is determined by individual needs. The following criteria must be met *for* continued stay:

- Continues to meet all admission criteria as evidenced by application updates at least every six months
- Seen by a licensed physician at interval not greater than every six months



### **Transfer/Discharge Criteria**

Discharge occurs when the client no longer meets admission criteria or the abuse or misuse of provided medications has put the client at risk for self harm.

### **Exclusionary Criteria**

The following exclusionary criteria applies to the drug programs:

- Primary diagnosis is intellectual disabilities or substance abuse
- Medication available through other means
- Failure to provide necessary income verification

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

The program will be staffed by a registered pharmacist, registered nurse with pharmacy technician licensure, and part-time secretary with pharmacy technician licensure.

## State &amp; County QuickFacts

**Shelby County, Alabama**

<b>People QuickFacts</b>	<b>Shelby County</b>	<b>Alabama</b>
Population, 2009 estimate	192,503	4,708,708
Population, percent change, April 1, 2000 to July 1, 2009	34.4%	5.9%
Population estimates base (April 1) 2000	143,279	4,447,382
Persons under 5 years old, percent, 2009	7.3%	6.7%
Persons under 18 years old, percent, 2009	26.2%	24.0%
Persons 65 years old and over, percent, 2009	9.2%	13.8%
Female persons, percent, 2009	50.7%	51.5%
White persons, percent, 2009 (a)	86.7%	70.9%
Black persons, percent, 2009 (a)	10.6%	26.3%
American Indian and Alaska Native persons, percent, 2009 (a)	0.3%	0.5%
Asian persons, percent, 2009 (a)	1.5%	1.0%
Native Hawaiian and Other Pacific Islander, percent, 2009 (a)	Z	Z
Persons reporting two or more races, percent, 2009	0.8%	1.1%
Persons of Hispanic or Latino origin, percent, 2009 (b)	4.3%	3.2%
White persons not Hispanic, percent, 2009	82.6%	68.0%
Living in same house in 1995 and 2000, pct 5 yrs old & over	48.9%	57.4%
Foreign born persons, percent, 2000	2.4%	2.0%
Language other than English spoken at home, pct age 5+, 2000	4.2%	3.9%
High school graduates, percent of persons age 25+, 2000	86.8%	75.3%
Bachelor's degree or higher, pct of persons age 25+, 2000	36.8%	19.0%
Persons with a disability, age 5+, 2000	19,992	945,705
Mean travel time to work (minutes), workers age 16+, 2000	28.6	24.8
Housing units, 2009	79,980	2,180,860
Homeownership rate, 2000	81.0%	72.5%
Housing units in multi-unit structures, percent, 2000	12.7%	15.3%
Median value of owner-occupied housing units, 2000	\$146,700	\$85,100
Households, 2000	54,631	1,737,080
Persons per household, 2000	2.59	2.49
Median household income, 2008	\$71,785	\$42,586
Per capita money income, 1999	\$27,176	\$18,189
Persons below poverty level, percent, 2008	5.8%	15.9%
<b>Business QuickFacts</b>	<b>Shelby County</b>	<b>Alabama</b>
Private nonfarm establishments, 2007	5,037	105,627 <sup>1</sup>
Private nonfarm employment, 2007	76,708	1,722,834 <sup>1</sup>
Private nonfarm employment, percent change 2000-2007	34.4%	4.2% <sup>1</sup>
Nonemployer establishments, 2007	15,032	313,813
Total number of firms, 2002	13,720	309,544
Black-owned firms, percent, 2002	S	9.3%

American Indian and Alaska Native owned firms, percent, 2002	F	0.9%
Asian-owned firms, percent, 2002	1.9%	1.4%
Native Hawaiian and Other Pacific Islander owned firms, percent, 2002	F	0.0%
Hispanic-owned firms, percent, 2002	1.7%	0.8%
Women-owned firms, percent, 2002	27.3%	26.4%

Manufacturers shipments, 2002 (\$1000)	1,050,443	66,686,220
Wholesale trade sales, 2002 (\$1000)	4,218,550	43,641,369
Retail sales, 2002 (\$1000)	1,583,276	43,784,342
Retail sales per capita, 2002	\$10,290	\$9,771
Accommodation and foodservices sales, 2002 (\$1000)	187,297	4,692,297
Building permits, 2009	563	13,266
Federal spending, 2008	807,699	47,965,756 <sup>1</sup>

**Geography QuickFacts**

	<b>Shelby County</b>	<b>Alabama</b>
Land area, 2000 (square miles)	794.69	50,744.00
Persons per square mile, 2000	180.2	87.6
FIPS Code	117	01
Metropolitan or Micropolitan Statistical Area	Birmingham-Hoover, AL Metro Area	

1: Includes data not distributed by county.

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

D: Suppressed to avoid disclosure of confidential information

F: Fewer than 100 firms

FN: Footnote on this item for this area in place of data

NA: Not available

S: Suppressed; does not meet publication standards

X: Not applicable

Z: Value greater than zero but less than half unit of measure shown

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, Census of Population and Housing, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report  
Last Revised: Monday, 16-Aug-2010 08:48:24 EDT

**Shelby County, AL**

P.O. Box 467  
 County Administration Building  
 Columbiana, AL 35051  
 Phone: (205)670-6550  
 WebSite: <http://www.shelbyal.com>

**County Seat:** Columbiana

**Year Organized:** 1818

**Square Miles:** 795

**Size of Board:** 9

**MSA:** Birmingham-Hoover, AL Metropolitan Statistical Area

**NACo Member County**

County Populations			
1980	1990	2000	2005
65,876	99,358	143,293	171,465

- [Places in Shelby County](#)
- [Census Bureau Quick Facts](#)
- [FEDSTATS](#)

Elected County Officials	
Name	Position
<a href="#">Daniel Acker</a>	Commissioner, District 4
<a href="#">Lindsey Allison</a>	Chairman, District 7
<a href="#">Joel Bearden</a>	Commissioner, District 5
Larry Dillard	Commissioner, District 6
<a href="#">Tommy Edwards</a>	Commissioner, District 2
<a href="#">Corley Ellis</a>	Commissioner, District 1
<a href="#">Robbie Hayes</a>	Commissioner, District 9
<a href="#">Jon Parker</a>	Commissioner, District 3
<a href="#">Rick Shepherd</a>	Commissioner, District 8

## Shelby County, AL

**Places in Shelby County**

- Alabaster	city	Incorporated Area
- Birmingham (County Seat)	city	Incorporated Area
- Calera	city	Incorporated Area
- Chelsea	town	Incorporated Area
- Columbiana (County Seat)	city	Incorporated Area
- Harpersville	town	Incorporated Area
- Helena	city	Incorporated Area
- Indian Springs	town	
- Indian Springs Village	town	Incorporated Area
- Montevallo	city	Incorporated Area
- Pelham	city	Incorporated Area
- Vestavia Hills	city	Incorporated Area
- Vincent	town	Incorporated Area
- Westover	town	Incorporated Area
- Wilsonville	town	Incorporated Area
- Wilton	town	Incorporated Area

**Note:** The above listing includes cities, towns, villages, and boroughs as per the US Census Bureau.

**US Census Definitions:**

**Place:** A concentration of population either legally bounded as an incorporated place, or identified as a Census Designated Place (CDP) including comunidades and zonas urbanas in Puerto Rico. Incorporated places have legal descriptions of borough (except in Alaska and New York), city, town (except in New England, New York, and Wisconsin), or village.

**Incorporated Place:** A type of governmental unit incorporated under state law as a city, town (except the New England states, New York, and Wisconsin), borough (except in Alaska and New York), or village and having legally prescribed limits, powers, and functions.

Other places in Shelby County not listed by the US Census Bureau

- Ellitsville
- Marvel
- Maylene
- Meadowbrook
- Saginaw
- Shelby
- Shoal Creek
- Siluria
- Sterrett
- Vandiver
- Vestavia

## State &amp; County QuickFacts

**Chilton County, Alabama**

<b>People QuickFacts</b>	<b>Chilton County</b>	<b>Alabama</b>
Population, 2009 estimate	42,971	4,708,708
Population, percent change, April 1, 2000 to July 1, 2009	8.5%	5.9%
Population estimates base (April 1) 2000	39,593	4,447,382
Persons under 5 years old, percent, 2009	6.6%	6.7%
Persons under 18 years old, percent, 2009	24.5%	24.0%
Persons 65 years old and over, percent, 2009	13.4%	13.8%
Female persons, percent, 2009	50.3%	51.5%
White persons, percent, 2009 (a)	87.3%	70.9%
Black persons, percent, 2009 (a)	11.4%	26.3%
American Indian and Alaska Native persons, percent, 2009 (a)	0.3%	0.5%
Asian persons, percent, 2009 (a)	0.3%	1.0%
Native Hawaiian and Other Pacific Islander, percent, 2009 (a)	Z	Z
Persons reporting two or more races, percent, 2009	0.8%	1.1%
Persons of Hispanic or Latino origin, percent, 2009 (b)	5.4%	3.2%
White persons not Hispanic, percent, 2009	82.4%	68.0%
Living in same house in 1995 and 2000, pct 5 yrs old & over	61.8%	57.4%
Foreign born persons, percent, 2000	1.9%	2.0%
Language other than English spoken at home, pct age 5+, 2000	3.6%	3.9%
High school graduates, percent of persons age 25+, 2000	66.2%	75.3%
Bachelor's degree or higher, pct of persons age 25+, 2000	9.9%	19.0%
Persons with a disability, age 5+, 2000	8,953	945,705
Mean travel time to work (minutes), workers age 16+, 2000	33.2	24.8
Housing units, 2009	18,821	2,180,860
Homeownership rate, 2000	82.3%	72.5%
Housing units in multi-unit structures, percent, 2000	3.2%	15.3%
Median value of owner-occupied housing units, 2000	\$81,800	\$85,100
Households, 2000	15,287	1,737,080
Persons per household, 2000	2.57	2.49
Median household income, 2008	\$40,292	\$42,586
Per capita money income, 1999	\$15,303	\$18,189
Persons below poverty level, percent, 2008	17.1%	15.9%
<b>Business QuickFacts</b>	<b>Chilton County</b>	<b>Alabama</b>
Private nonfarm establishments, 2007	804	105,627 <sup>1</sup>
Private nonfarm employment, 2007	7,518	1,722,834 <sup>1</sup>
Private nonfarm employment, percent change 2000-2007	10.2%	4.2% <sup>1</sup>
Nonemployer establishments, 2007	2,892	313,813
Total number of firms, 2002	2,936	309,544
Black-owned firms, percent, 2002	F	9.3%

American Indian and Alaska Native owned firms, percent, 2002	F	0.9%
Asian-owned firms, percent, 2002	F	1.4%
Native Hawaiian and Other Pacific Islander owned firms, percent, 2002	F	0.0%
Hispanic-owned firms, percent, 2002	F	0.8%
Women-owned firms, percent, 2002	26.5%	26.4%

Manufacturers shipments, 2002 (\$1000)	237,222	66,686,220
Wholesale trade sales, 2002 (\$1000)	D	43,641,369
Retail sales, 2002 (\$1000)	286,336	43,784,342
Retail sales per capita, 2002	\$7,069	\$9,771
Accommodation and foodservices sales, 2002 (\$1000)	23,094	4,692,297
Building permits, 2009	20	13,266
Federal spending, 2008	255,577	47,965,756 <sup>1</sup>

**Geography QuickFacts**

	<b>Chilton County</b>	<b>Alabama</b>
Land area, 2000 (square miles)	693.98	50,744.00
Persons per square mile, 2000	57.1	87.6
FIPS Code	021	01
Metropolitan or Micropolitan Statistical Area	Birmingham- Hoover, AL Metro Area	

1: Includes data not distributed by county.

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

D: Suppressed to avoid disclosure of confidential information

F: Fewer than 100 firms

FN: Footnote on this item for this area in place of data

NA: Not available

S: Suppressed; does not meet publication standards

X: Not applicable

Z: Value greater than zero but less than half unit of measure shown

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, Census of Population and Housing, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits, Consolidated Federal Funds Report  
Last Revised: Monday, 16-Aug-2010 08:48:24 EDT

**Chilton County, AL**

P.O. Box 1948  
 County Courthouse  
 Clanton, AL 35046-1948  
 Phone: (205)755-1551  
 WebSite: <http://www.chiltoncounty.org>

**County Seat:** Clanton

**Year Organized:** 1868

**Square Miles:** 694

**Size of Board:** 7

**MSA:** Birmingham-Hoover, AL Metropolitan Statistical Area

**NACo Member County**

County Populations			
1980	1990	2000	2005
30,381	32,458	39,593	41,744

- [Places in Chilton County](#)
- [Census Bureau Quick Facts](#)
- [FEDSTATS](#)

Elected County Officials	
Name	Position
<a href="#">Bobby Agee</a>	Commissioner, District 1
<a href="#">Allen Caton</a>	Commissioner
Lamar Hayes	Commissioner, District 3
<a href="#">Joseph Headley</a>	Commissioner
<a href="#">Timothy Mims</a>	Chairman
<a href="#">Greg Moore</a>	Commissioner
M. L. Turnipseed	Commissioner
Glen McGriff	County Tax Assessor
Gerald McKinnon	County Tax Collector



## Chilton County, AL

**Places in Chilton County**

- Clanton (County Seat)	city	Incorporated Area
- Jemison	town	Incorporated Area
- Maplesville	town	Incorporated Area
- Thorsby	town	Incorporated Area

**Note:** The above listing includes cities, towns, villages, and boroughs as per the US Census Bureau.

**US Census Definitions:**

**Place:** A concentration of population either legally bounded as an incorporated place, or identified as a Census Designated Place (CDP) including comunidades and zonas urbanas in Puerto Rico. Incorporated places have legal descriptions of borough (except in Alaska and New York), city, town (except in New England, New York, and Wisconsin), or village.

**Incorporated Place:** A type of governmental unit incorporated under state law as a city, town (except the New England states, New York, and Wisconsin), borough (except in Alaska and New York), or village and having legally prescribed limits, powers, and functions.

Other places in Chilton County not listed by the US Census Bureau

- Stanton
- Verbena

Mental Illness  
Program Descriptions

<b>Program Descriptions</b>	<b>Page Number</b>
Outpatient Services	1-1a
Case Management	2-2a
Emergency Services	3-3a
Adult Intensive Day Treatment	4-4b
Family and Youth Intervention Program	5-5b
Family Integrity Network Determination (FIND) Program	6-6b
Richard Lee Parris Home	7-7b
Michael J. Horsley Home	8-8b
Katherine Vickery Home	9-9b
In-Home Intervention for Adults	10-10b
FYI Junior Program	11-11b

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Program**

**Name of Program**

Outpatient Services

**Definition**

Therapeutic services provided in an outpatient setting primarily to Chilton and Shelby County residents. The client may receive clinical intervention to decrease presenting signs and symptoms to enable them to maintain clinical stability and independent functioning.

**Location**

Outpatient services are offered in Shelby County at 2100 Shelby County Community Services Road in Pelham, AL and in Chilton County at 110 Medical Center Drive in Clanton, AL. Services may be offered in other settings that provide an adequate therapeutic environment and protects the client's right to privacy and confidentiality.

**Hours of Operation**

Services are provided from 8:00 a.m. until 4:30 p.m., Monday through Friday with after hour's services by appointment.

**Program/Service Components**

The focus of outpatient treatment is variable and depends on the client's individual needs and preference. The following services are available through outpatient services:

- Intake Assessment/Evaluation
- Diagnostic Testing
- Individual Therapy/Counseling
- Group Therapy/Counseling (group size not to exceed 15 adults and 10 children or adolescents)
- Family Therapy/Counseling
- Crisis Intervention
- Pre-hospitalization/Court Screening
- Physician Assessment and Treatment provided by a licensed psychiatrist
- Medication Administration
- Medication Monitoring (non-physician)
- Basic Living Skills Training
- Family Support and Education
- Mental Health Consultation
- Treatment Plan review
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following criteria are necessary for admission:

- Client meets criteria for a mental illness/severe emotional disturbance diagnosis regardless of age
- Client exhibits significant symptoms that interfere with the ability to function in more than one life area
- Client demonstrates motivation to comply with treatment plan
- Client has been recently discharged from inpatient psychiatric treatment

### **Continued Stay Criteria**

All of the following criteria must be met for continued stay:

- Severity of illness and resulting impairment continues to require outpatient treatment
- Client continues to make progress and is compliant with treatment plan
- There is reasonable likelihood of substantial benefit as a result of active intervention

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client has met treatment plan goals
- Therapist and client agree that maximum benefit from services has been achieved
- Client no longer meets continued stay criteria and requires less or more intensive level of care
- Client becomes an imminent danger to self or others and will be transferred to higher level of care based on client need
- Client is non compliant with treatment plan

### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Client is a danger to self or others
- Client exhibits such severity of symptoms and inadequacy of social support system that treatment is required at a more intensive level of care
- Client has a condition which is not expected to respond to treatment and impairment will not allow benefit at this level of care
- Client has a primary diagnosis of substance abuse/use only and/or presents for services intoxicated or noticeably under the influence of drugs
- Client has a primary diagnosis of mental retardation

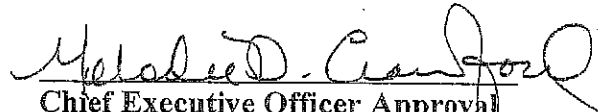
### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Any master's level, license eligible staff with two (2) year's post master's experience, or any master's level staff under the supervision of a master's level staff with two (2) year's post master's level clinical experience.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Program**

**Name of Program**

Case Management

**Definition**

Services designed to link clients with necessary community support systems and advocacy when the client or family member is unable to do so.

**Location**

Case management services are typically provided in the community setting.

**Hours of Operation**

Services are provided from 8:00 a.m. until 4:30 p.m., Monday through Friday with after hours services available as needed.

**Program/Service Components**

Services provided are based upon client need and may include any of the following:

- Systematic evaluation/reevaluation of the human service needs of each client. The development of a systematic client oriented written plan that is developed within thirty days of the first face to face case management service unless services terminate earlier and that lists the actions necessary to meet the needs of each client
- Linkage and service arrangement to community services
- Assistance through crisis situations and/or arrangement of such assistance by other professional/personal caregivers
- Arrange to meet transportation needs
- Advocacy
- Monitoring client's access to, linkage with, and usage of necessary community support
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

**Admission Criteria**

The following criteria are necessary for admission:

- Client has a current DSM-IV Axis I diagnosis that meets SMI or SED criteria as established by DMH
- Resident of Chilton or Shelby County

- Client has human service needs as identified in the SUN-R Needs Assessment, CANS or EC-CANS
- Client willing to participate in case management services
- Client has an open clinical record with Chilton Shelby Mental Health Center unless approved by the Chief Operations Officer, is enrolled in the Permanent Supportive Housing Program or completed Project FIND with follow up services being provided

#### **Continued Stay Criteria**

Expected length of stay is determined by client human service needs. The following criteria must be met for continued stay:

- Client continues to have unmet human service needs as identified on the SUN-R Needs Assessment, CANS or EC-CANS
- Client continues to agree to participate in case management services

#### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- The SUN-R Needs Assessment, CANS or EC-CANS has no human service needs identified
- Client refuses to participate in case management services
- Client is unable to benefit from case management services

#### **Exclusionary Criteria**

Exclusionary criteria for case management services include the following:

- There are no identified human service needs on the SUN-R Needs Assessment, CANS or EC-CANS


#### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

#### **Staffing**

Program is clinically supervised by a master's level staff with two (2) year's post master's experience, who has attended an approved DMH case management training and case management supervisors training. Administrative coordination is provided by the Community Support Program Director, who has attended an approved DMH case management training and case management supervisors training. Case management services are provided by bachelor's level staff who have completed a DMH/MR approved case management training program, infection control training and possess a valid Alabama driver's license. Case managers who work with clients who are deaf must complete training focusing on deafness and mental illness provided by the DMH Office of Deaf Services.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Emergency Services

**Definition**

Crisis response provided twenty-four (24) hours a day, seven (7) days per week for residents of Chilton and Shelby counties with provision for handling special and difficult cases, e.g., violent/suicidal, deaf or limited English proficiency. Services may be provided to clients in the surrounding area on an emergency basis.

**Location**

Emergency services are provided face to face at any office location, secure community location or through telephone contact.

**Hours of Operation**

Emergency services are provided from 8:00 a.m. until 4:30 p.m., Monday through Friday at each office location. The telephones are answered by a trained answering service after hours and the calls are forwarded to the master's level clinician who is on call.

**Program/Service Components**

Services provided are based upon client need but may include any of the following

- Immediate crisis response
- Intervention which may include face to face response
- Referral
- Assessment
- Mental Health Consultation
- Assistance accessing inpatient psychiatric services as needed
- Evaluation of clients in jail and assistance continuing prescribed psychiatric medications while in jail
- Assist clients who are deaf/hard of hearing with accessing linguistically appropriate emergency care
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

Admission to emergency services is accomplished when an individual presents with a problem that requires emergency intervention.

### **Continued Stay Criteria**

Clients are referred to other services.

### **Transfer/Discharge Criteria**

Transfer/discharge from emergency services is accomplished when the emergency has been resolved and follow-up has been accomplished if needed.

### **Exclusionary Criteria**

Emergency services will not be provided in locations that are not secure for the client or staff.

### **Appeal Process**

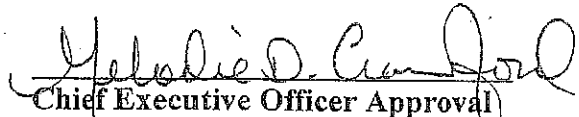
Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

All services provided by a Master's level clinical staff with crisis intervention training. A Master's level clinician with at least two years post-masters experience shall be available as a back up to the staff providing emergency telephone service.



Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Program**

**Name of Program**

Adult Intensive Day Treatment

**Definition**

An intensive, comprehensive and structured program that provides highly structured services designed to bridge acute treatment and less intensive services with the goals of community living skills acquisition/enhancement, increased level of functioning and enhanced community integration.

**Location**

The program is located at 151 Hamilton Lane in Calera, Alabama.

**Hours of Operation**

The program operates Monday through Friday from 9:00 a.m. until 1:30 p.m., except on scheduled holidays. Clients will be scheduled at least four (4) hours/day and three (3) days per week. When clinically indicated less frequent attendance may be utilized during a brief period of transition to less intensive levels of treatment.

**Program/Service Components**

The following services are provided within the program to specifically address individual client impairments, deficits, and clinical needs:

- Initial screening to evaluate the appropriateness of client participation
- Development of an individualized treatment plan
- Medication evaluation and management provided by a licensed psychiatrist
- Individual, group, and family therapy (individual and/or group therapy will be provided, at a minimum, one (1) hour per week unless clinically contraindicated, group therapy size will not exceed fifteen)
- Activity/recreational therapy (e.g. sports, leisure activities, hobbies, crafts, music, socialization)
- Social skills training (e.g. conversation and interpersonal skills)
- Coping skills training (e.g. stress management, symptoms management, problem solving)
- Basic living skills (e.g. adult basic education, GED, shopping, cooking, housekeeping, grooming)
- Utilization of community resources
- Family education (e.g. education that is closely related to the presenting problems such as diagnosis, symptoms, medication, coping skills, etc.)
- Medication administration
- Medication monitoring (non-physician)
- Client education (e.g. education that is closely related to presenting problems such as diagnosis, symptoms, medications, etc. rather than academic training)

- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

Anyone enrolled in the Day Treatment Program must meet the following criteria:

- Eighteen (18) years of age or older
- Presence of a psychiatric diagnosis and meet SMI criteria
- Resident of Chilton or Shelby County
- Moderately disabling persistent, chronic, and/or refractory symptoms with no significant clinical progress made or expected in a less intensive level of care
- Symptoms that do not meet admission criteria for more intensive levels of care but do require the daily structure and supervision of a treatment oriented therapeutic milieu
- Intensive day treatment can be reasonably expected to improve the client's symptoms, condition, or functional level sufficient to permit transition to a less intensive level of care
- Admission is approved by a staff member who is a licensed physician, licensed psychologist, licensed certified social worker, licensed marriage and family therapist, a registered nurse with a master's degree in psychiatric nursing, certified registered nurse practitioner, licensed physician's assistant or a licensed professional counselor

### **Continued Stay Criteria**

Expected length of treatment is determined based upon the client's identified treatment needs but not to exceed six (6) months. Treatment past six (6) months must be clinically justified by the Chief Operations Officer. All of the following criteria must be met for continued stay:

- Goals and objectives specified on the treatment plan have not been substantially attained or new problems have emerged
- Further treatment can be reasonably expected to result in progress toward goals and objectives and/or continued stability
- Continued treatment cannot be provided in less intensive levels of care (e.g., rehabilitative day program, case management, standard outpatient services) due to a reasonable risk of relapse and/or hospitalization
- Documented clinical judgment indicates that attempts to transition the client to a less intensive level of care is reasonably expected to result in the re-emergence of symptoms sufficient to meet admission criteria
- Continued stay is approved by the Chief Operations Officer for a specified period of time not to exceed three months per extension to achieve clearly articulated clinical objectives

### **Transfer/Discharge Criteria**

All of the following must be met for discharge:

- Treatment goals and objectives have been substantially attained and continued treatment can be provided in less intensive levels of care
- Client's degree of impairment, severity of symptoms, and level of functioning have improved enough to resume normal activities or to receive less intensive services (e.g., rehabilitative day program, case management, standard outpatient services)
- Client's degree of impairment, severity of symptoms and level of functioning necessitates admission to a more intensive level of care

- Client primarily needs support, activities, socialization or custodial care that could be provided in other less intensive settings (e.g., drop in center, senior citizens' center, peer support group)
- Client is unwilling or unable to participate in/benefit from the program due to severity of symptoms, functional impairment, behavioral problems, personal choice, or cognitive limitations despite repeated documented efforts to engage the client

### **Exclusionary Criteria**

Exclusionary criteria for the Day Treatment Program includes the following:

- The client's degree of impairment, severity of symptoms, and level of functioning require a more intensive level of care
- A less intensive level of care would be sufficient to provide treatment services for the client
- The client is experiencing mild persistent, chronic symptoms without acute exacerbation and less intensive levels of care can reasonably be expected to improve the client's symptoms, condition and functional level
- Client has a primary diagnosis of mental retardation

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

The program coordinator must have a master's degree in a mental health related field and two (2) year's post master's direct mental illness experience. In physically isolated settings, there must be one other staff member in addition to the coordinator present during the hours of operation. The overall staff to client ratio cannot exceed 1 to 15. The mental health technician position will require a high school diploma. Each client will be assigned a counselor/therapist who has a master's degree in a mental health related field.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Family and Youth Intervention Program

**Definition**

Comprehensive and structured services provided to Shelby County youth and their families. The services are directed towards eliminating or reducing psychiatric symptomatology and dysfunction from a Serious Emotional Disorder.

**Location**

Linda Nolen Learning Center at 2280 Highway 35 in Pelham, Alabama.

**Hours of Operation**

Monday through Friday from 1:00 p.m. until 5:00 p.m., hours may vary during school holidays.

**Program/Service Components**

Program and services offered are based on consumer need and may include any of the following:

- Initial screening to evaluate the appropriateness of consumer participation
- Development of an individualized treatment plan
- Symptom/Medication Management and Education
- Social Skills Training that enhances family, social and community living skills
- Stress Management Training
- Leisure/Recreational Skills that enhance the use of leisure and play time
- Basic Living Skills Training that enhances personal care skills
- Group Therapy provided at a minimum of one hour per week unless clinically contraindicated, group therapy size will not exceed ten
- Individual Therapy (individual or family therapy will be provided at a minimum of one hour every two weeks)
- Family Therapy
- Family Education and Support regarding age related emotional and cognitive development and needs
- Therapeutic Field Trips
- Case Management Services
- Mental Health Consultation
- Psychiatric Assessment and Treatment provided by a licensed psychiatrist
- 24 Hour Crisis Intervention and Resolution Services
- Coordination with local Board of Education for educational needs

- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following criteria are necessary for admission:

- Between the ages of eight (8) and thirteen (13) or in fourth through eighth grade
- Consumer and family are motivated and willing to participate in the program
- Have a diagnosed mental illness disorder (DSM-IV Axis I) and meet SED criteria
- Demonstrate a combination of at least five of the following whose severity would prevent treatment in a less restrictive environment:
  - Poor self control
  - Cruelty to animals
  - Inappropriate aggressive behavior
  - Angry/hostile temper tantrums
  - Hyperactivity
  - Withdrawn
  - Running away
  - Destructiveness
  - Poor school performance
  - Truancy
  - Defiance of authority
  - Manipulative behavior
  - Sexual maladjustment
  - Assaultive behavior
  - Child abuse victim
  - Depression
  - Anxiety
  - Homicidal/Suicidal ideation
  - Drug experimentation
  - Sexual abuse
  - Irrational fears
  - Attention seeking behavior
  - Encopretic/Enuretic
  - Low frustration tolerance
  - Inadequate social skills
  - Dysfunctional family relations
- Admission is approved by a staff member who is a licensed physician, licensed psychologist, licensed certified social worker, licensed marriage and family therapist, a registered nurse with a master's degree in psychiatric nursing, certified registered nurse practitioner, licensed physician's assistant or a licensed professional counselor.
- Client shall have moderately disabling consistent and/or refractory symptoms with no significant clinical progress made or expected in a less intensive level of care.
- The program shall be reasonably expected to improve the client's symptoms, condition or functional level sufficient to permit transition to a less intensive level of care.

### **Continued Stay Criteria**

Expected length of treatment is approximately one academic year with determination for continuing services based on the participant's treatment needs. Treatment past one academic year must be clinically justified by the Chief Operations Officer and not be extended more than four months per extension to achieve clearly articulated clinical objectives.

The following criteria must be met for continued stay:

- Goals and objectives specified on the treatment plan have not been substantially attained or new problems have emerged
- Further treatment can be reasonably expected to result in progress towards goals/objectives and/or continued stability
- Documentation that treatment cannot be provided in a less intensive level of care due to reasonable risk of relapse and/or hospitalization
- Clinical judgment indicates that an attempt to transition the client to a less intensive level of care is reasonably expected to result in the re-emergence of symptoms sufficient to meet admission criteria
- Continues to meet admission criteria
- Consumer and family exhibit an ability to respond positively to the treatment program and is motivated for continued treatment as evidenced by compliance with program rules and procedures
- Continued need to monitor for risk of harm to self or others
- Medications have not reached therapeutic levels

### **Transfer/Discharge Criteria**

At least one of the following must be met:

- Treatment goals and objectives have been substantially obtained and continued treatment can be provided in a less intensive level of care
- Client's degree of impairment, severity of symptoms and/or level of functioning necessitates admission to a more intensive level of care
- Client is unwilling or unable to participate in/benefit from the program due to severity of symptoms, functional impairments, behavioral problems, personal choice or cognitive limitations in spite of repeated efforts to engage the client
- The consumer's symptoms have reduced to the point that they no longer significantly impair social, vocational, or educational functioning

### **Exclusionary Criteria**

Exclusionary criteria for FYI program includes the following:

- The client is experiencing mild persistent chronic symptoms without acute exacerbation and less intensive levels of care can be reasonably expected to improve clients symptoms, condition and functional level
- The consumer has a medical condition which would obstruct or significantly interfere with regular activity participation
- The consumer is dangerous, assaultive, combative or poses a threat to the safety of the other participants
- Clients degree of impairment, severity of symptoms, and level of functioning require a more intensive level of care.

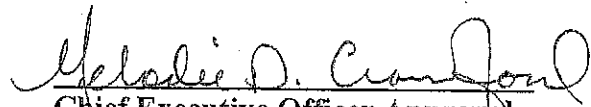
### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program coordinator with a master's degree in a mental health related field and two years of direct mental illness service experience, one of which must be in services for children and adolescents. A master's level therapist and bachelor's degree case manager. Overall staff to client ratio does not exceed 1 to 10. In physically isolated setting, there must be at least one other staff member present besides the coordinator or master's level clinician during hours of operation. All staff shall have specialized training/experience in working with children or shall receive supervision from a staff member who has specialized training/experience in working with children. Required experience is two (2) years supervised experience in working with children or two (2) specialized graduate courses related to working with children or twelve (12) CEU's of training/workshop in working with children.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Family Integrity Network Demonstration (F.I.N.D.) Program

**Definition**

Intensive therapeutic services provided to children in Shelby County on an outreach basis to prevent out-of-home placement of the client and to increase/maintain family cohesion. The services will be directed toward strengthening the family system, improving the overall functioning level of the client and family, and facilitating the client's adaptation to a least restrictive treatment and educational environment. Services are time limited (twelve to sixteen weeks) and home based provided by a two person treatment team. The team is the primary provider of services and is responsible for helping clients in all aspects of community living. The majority of the Intensive In Home services are to be delivered with the team together at a frequency of 2-3 direct face to face contacts per week during the Assessment Phase; 2-5 direct face to face contacts per week in the Treatment Phase; and 1-2 direct face to face contacts per week during the Generalization Phase. The active caseload for a team shall not exceed 6 clients and their families.

**Location**

The F.I.N.D. team office is located at 2100 Shelby County Community Services Road in Pelham, Alabama, however the majority of services will occur in the community in places where clients spend their time.

**Hours of Operation**

Monday through Friday from 8:00 a.m. to 4:30 p.m., with hours varying as dictated by client need. The hours of delivering Intensive In Home services shall be flexible to accommodate the scheduling demands and unique issues of the target population (before 8:00 a.m. and after 4:30 p.m. as needed).

**Program/Service Components**

Program services offered are highly individualized and may include any of the following:

- Clinical Assessment (CANS or EC-CANS) that demonstrates the need for this level of care
- Treatment plan which should address needs identified on CANS or EC-CANS
- Treatment Plan Review
- Individual Psychotherapy
- Family Psychotherapy
- Family Support and Education
- Case Management Services (for at least one year after discharge from the program)
- Crisis Intervention and Resolution (24 hour availability)
- Parent/Guardian/Significant Other Training



- Medication Monitoring
- Linkage to other Community Resources
- Basic Living Skills
- Mental Health Consultation
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following criteria are necessary for admission:

- Between the ages of five (5) and seventeen (17)
- Have a diagnosed mental illness disorder (DSM-IV-TR)
- Meet SED criteria as defined by the Alabama Department of Mental Health
- Be at risk for out-of-home placement
- Willing to participate in the program
- Parent(s) or legal guardians are willing to participate in weekly psychotherapy session(s)
- The client's primary mental health provider is in agreement with admission and agrees to terminate services during the client's participation in the F.I.N.D. program
- Need to diffuse an immediate crisis situation, stabilize the family unit and prevent out of home placement
- IQ of 70 or above
- Admission is approved by a staff member who is a licensed physician, licensed psychologist, licensed certified social worker, licensed marriage and family therapists, a registered nurse with a master's degree in psychiatric nursing, certified registered nurse practitioner, licensed physician's assistant or a licensed professional counselor.

### **Continued Stay Criteria**

Expected length of stay is twelve (12) weeks with the option of extending services for an additional four (4) weeks if indicated by client treatment needs. At least one of the following criteria must be met for continued stay and must be approved by the licensed program coordinator:

- Continues to meet admission criteria
- Coping skills continue to be impaired and interfere with functioning in less intensive treatment setting
- Symptoms and behaviors that previously led to referral persist or new symptoms have appeared which interfere with the client's ability to cope
- Client's treatment plan received revision requiring more treatment time
- Client needs further regulation of medication under close supervision

### **Transfer/Discharge Criteria**

At least one of the following must be met:

- The client no longer meets admission criteria or meets criteria for a more intensive level of service
- The client meets criteria for a less intensive level of service than those dictated by the In Home Model and therefore client is not at immediate risk for out of home placement

- The client's symptoms have reduced to the point that they no longer significantly impair social, vocational, or educational functioning
- The client and/or family is unwilling to comply with program expectations and requirements
- The client and/or family has requested transfer to another service modality
- The client/family has not responded to repeated follow up by the In Home team during a fourteen day period
- The Team is no longer a two person team and exceeds a two week period
- The intensive service time limit has been reached (maximum of 16 weeks)
- The Treatment Plan goals have been met to the extent that the intensive in home therapy services are no longer needed
- The In Home team is unable to meet obvious, suspected or expressed needs of the client and/or his or her family system
- The client and his or her family are receiving duplicate services from another agency that either can not be terminated or/are preferred by the family

### **Exclusionary Criteria**


Exclusionary criteria includes the following:

- The client is so actively psychotic, suicidal or acting out that he/she requires hospitalization
- The client has medical condition which would obstruct or significantly interfere with regular activity participation
- The client is dangerous, assaultive, combative or poses a threat to the safety of the other participants
- Client or family is actively engaged in substance abuse

### **Staffing**

Intensive In Home services are supervised by a staff member who has a master's degree and 2 years post-master's clinical experience and who has completed a DMH approved case management training program and a DMH approved intensive in home training program. Two person team, one master's level mental health professional with at least one year of post-master's experience in child and adolescent/family services and one person with a bachelor's degree. Case manager with a bachelor's degree who will become involved with the client and family at week 9 of the program and will continue to provide services to the client and family for at least one year after discharge from the program. All team members must have successfully completed a DMH approved case manager training program and a DMH in home training program. All staff shall have specialized training/experience in working with children or shall receive supervision in this area one hour per week from a staff member who has specialized training/experience in working with children and shall receive 20 hours of specialized training per year for two years from date they begin providing services. Required experience is two (2) years supervised experience in working with children or two (2) specialized graduate courses related to working with children. Documentation of a minimum one hour face to face staffing consultation with the supervisor weekly as documented in clinical chart and shall include any recommendations made to the team.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Richard Lee Parris Home

**Definition**

Residential services are designed to offer services in a supportive therapeutic milieu with the expectation that clients will develop the skills necessary to live and function in the least restrictive environment possible. It is a setting that has awake staff on the premises 24 hours a day when clients are present.

**Location**

The Richard Lee Parris Home is located at 10080 Highway 31 South, in Calera, AL.

**Hours of Operation**

A ten bed group home that operates twenty-four (24) hours a day, seven (7) days a week.

**Program/Service Components**

Services provided depend upon individual client need but may include the following provided either in house or arranged for by the residential staff:

- Housing
- Nutritious meals and snacks
- Medication management
- Transportation services
- Basic living skills training (money management, laundering, meal preparation, shopping, transportation, house cleaning, personal hygiene, nutrition, and health and safety)
- Social skills training (which includes communication skills training)
- Education regarding psychiatric illness
- Family support and education
- Recreational activities
- Assistance with accessing the following services:
  - Mental health services including case management services
  - Medical and dental services
  - Hearing and vision services
  - Educational services
  - Vocational services
  - Community resources and services
  - Applying for benefits
  - Locating long term community placement in least restrictive setting
  - Community orientation

- Referral to appropriate resources (DHR, Probate Court, etc.) for clients who may need legal guardian while residing in the program
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following are criteria for admission to residential services:

- 18 years of age or older
- Have treatment needs that can be met through residential services
- Residential services are the least restrictive level of treatment available
- Willing to participate in daily structured activities as outlined in the treatment plan
- Have a psychiatric diagnosis that meets criteria for Serious Mental Illness as defined by the Alabama Department of Mental Health
- Clients present a combination of the following criteria whose severity would preclude treatment in less restrictive environment:
  - Impaired contact with reality manifested by hallucinations, delusions, or ideas of reference
  - Withdrawal, regression, or confusion not warranting inpatient hospitalization
  - Moderate to severe disabling depression
  - Moderate to severe disabling anxiety
  - Disabling somatic symptoms
  - Poor medication compliance
  - Inpatient care is not warranted
  - Poor socialization skills
  - Inappropriate attention-seeking behaviors
  - Poor interpersonal skills
  - Inadequate problem solving skills
  - In need of twenty-four (24) hour protective oversight and supervision in daily living

*Admission Prioritization* will be as follows:

- Any Chilton or Shelby county resident in a state hospital awaiting discharge
- Any Alabama resident awaiting discharge from a state hospital
- Any Chilton or Shelby county resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment
- Any Alabama resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment

### **Continued Stay Criteria**

The initial individualized length of stay will be based on the resident's presenting needs as identified on the treatment plan but will not exceed one year. The Residential Services Level of Functioning will be utilized in determining the need for extending the length of stay past one year. At least one of the following must be met for continued stay:

- Continues to meet admission criteria
- Continues to exhibit an ability to respond positively to the treatment program and is motivated for continued treatment as evidenced by compliance with treatment plan and group home responsibilities
- Evidence of decompensation

- Medications have not reached therapeutic levels
- Progress has been made and a regression is anticipated if client is discharged to a less intense level of care

### **Transfer/Discharge Criteria**

At least one of the following must be met for transfer/discharge:

- Client no longer meets admission criteria or meets criteria for a more or less intense level of care
- Client has requested transfer to another service or level of care
- Client has achieved all treatment plan goals and is no longer in need of residential services

### **Exclusionary Criteria**

Exclusionary criteria for residential services include the following:

- Principal diagnosis of alcoholism or drug dependence
- Principal diagnosis of mental retardation
- Primary organic disorder
- Primary physical disorder (serious illness requiring hospital care, nursing care, home health care or impaired mobility that prohibits participation in program services)
- Resident poses a threat to the safety and welfare of other residents
- Exacerbation of symptomatology indicates that a more restrictive level of treatment would be more appropriate in meeting the individual's treatment needs.

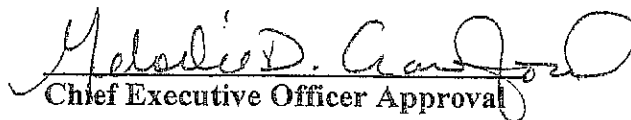
### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program coordinator with a master's degree in a mental health related field and two years experience in a direct service functional area. Group home manager with bachelor's degree with experience in residential settings. Technicians with high school diploma and appropriate experience. There will be one Bachelor's level manager and two mental health technicians during the day. Two mental health technicians will be present during the evening hours and two awake mental health technicians will be on duty during the midnight shift when clients are present. There will be a .25 aid/secretary available during the day.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Michael J. Horsley Home

**Definition**

Residential services are designed to offer services in a supportive therapeutic milieu with the expectation that clients will develop the skills necessary to live and function in the least restrictive environment possible. It is a setting that has awake staff on the premises 24 hours a day when clients are present.

**Location**

The Michael J. Horsley Home is located at 10072 Highway 31 South, in Calera, AL.

**Hours of Operation**

A ten bed group home that operates twenty-four (24) hours a day, seven (7) days a week.

**Program/Service Components**

Services provided depend upon individual client need but may include the following provided either in house or arranged for by the residential staff:

- Housing
- Nutritious meals and snacks
- Medication management
- Transportation services
- Basic living skills training (money management, laundering, meal preparation, shopping, transportation, house cleaning, personal hygiene, nutrition, and health and safety)
- Social skills training (which includes communication skills training)
- Education regarding psychiatric illness
- Family support and education
- Recreational activities
- Assistance with accessing the following services:
  - Mental health services including case management services
  - Medical and dental services
  - Hearing and vision services
  - Educational services
  - Vocational services
  - Community resources and services
  - Applying for benefits
  - Locating long term community placement in least restrictive setting
  - Community orientation

- Referral to appropriate resources (DHR, Probate Court, etc.) for clients who may need legal guardian while residing in the program
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following are criteria for admission to residential services:

- 18 years of age or older
- Have treatment needs that can be met through residential services
- Residential services are the least restrictive level of treatment available
- Willing to participate in daily structured activities as outlined in the treatment plan
- Have a psychiatric diagnosis that meets criteria for Serious Mental Illness as defined by the Alabama Department of Mental Health
- Clients present a combination of the following criteria whose severity would preclude treatment in less restrictive environment:
  - Impaired contact with reality manifested by hallucinations, delusions, or ideas of reference
  - Withdrawal, regression, or confusion not warranting inpatient hospitalization
  - Moderate to severe disabling depression
  - Moderate to severe disabling anxiety
  - Disabling somatic symptoms
  - Poor medication compliance
  - Inpatient care is not warranted
  - Poor socialization skills
  - Inappropriate attention-seeking behaviors
  - Poor interpersonal skills
  - Inadequate problem solving skills
  - In need of twenty-four (24) hour protective oversight and supervision in daily living

*Admission Prioritization* will be as follows:

- Any Chilton or Shelby county resident in a state hospital awaiting discharge
- Any Alabama resident awaiting discharge from a state hospital
- Any Chilton or Shelby county resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment
- Any Alabama resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment

### **Continued Stay Criteria**

The initial individualized length of stay will be based on the resident's presenting needs as identified on the treatment plan but will not exceed one year. The Residential Services Level of Functioning will be utilized in determining the need for extending the length of stay past one year. At least one of the following must be met for continued stay:

- Continues to meet admission criteria
- Continues to exhibit an ability to respond positively to the treatment program and is motivated for continued treatment as evidenced by compliance with treatment plan and group home responsibilities.
- Evidence of decompensation

- Medications have not reached therapeutic levels
- Progress has been made and a regression is anticipated if client is discharged to a less intense level of care

### **Transfer/Discharge Criteria**

At least one of the following must be met for transfer/discharge:

- Client no longer meets admission criteria or meets criteria for a more or less intense level of care
- Client has requested transfer to another service or level of care
- Client has achieved all treatment plan goals and is no longer in need of residential services

### **Exclusionary Criteria**

Exclusionary criteria for residential services include the following:

- Principal diagnosis of alcoholism or drug dependence
- Principal diagnosis of mental retardation
- Primary organic disorder
- Primary physical disorder (serious illness requiring hospital care, nursing care, home health care or impaired mobility that prohibits participation in program services)
- Resident poses a threat to the safety and welfare of other residents
- Exacerbation of symptomatology indicates that a more restrictive level of treatment would be more appropriate in meeting the individual's treatment needs.

### **Appeal Process**

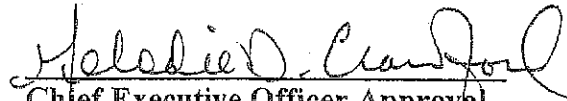
Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program coordinator with a master's degree in a mental health related field and two years experience in a direct service functional area. Group home manager with bachelor's degree with experience in residential settings. Technicians with high school diploma and appropriate experience. There will be one Bachelor's level manager and one mental health technician during the day. Two mental health technicians will be present during the evening hours and one awake mental health technician will be on duty during the midnight shift when clients are present. There will be a .25 aid/secretary available during the day.



Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Katherine Vickery Home

**Definition**

Residential services are designed to offer services in a supportive therapeutic milieu with the expectation that clients will develop the skills necessary to live and function in the least restrictive environment possible. It is a setting that has awake staff on the premises 24 hours a day when clients are present.

**Location**

The Katherine Vickery Home is located at 1105 Lay Dam Road in Clanton, AL.

**Hours of Operation**

A ten bed group home that operates twenty-four (24) hours a day, seven (7) days a week.

**Program/Service Components**

Services provided depend upon individual client need but may include the following provided either in house or arranged for by the residential staff:

- Housing
- Nutritious meals and snacks
- Medication management
- Transportation services
- Basic living skills training (money management, laundering, meal preparation, shopping, transportation, house cleaning, personal hygiene, nutrition, and health and safety)
- Social skills training
- Education regarding psychiatric illness
- Family support and education
- Recreational activities
- Assistance with accessing the following services:
  - Mental health services including case management services
  - Medical and dental services
  - Hearing and vision services
  - Educational services
  - Vocational services
  - Community resources and services
  - Applying for benefits
  - Locating long term community placement in least restrictive setting
  - Community orientation

- Referral to appropriate resources (DHR, Probate Court, etc.) for consumers who may need legal guardian while residing in the program
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following are criteria for admission to residential services:

- 18 years of age or older
- Have treatment needs that can be met through residential services
- Residential services are the least restrictive level of treatment available
- Willing to participate in daily structured activities as outlined in the treatment plan
- Have a psychiatric diagnosis that meets criteria for Serious Mental Illness as defined by the Alabama Department of Mental Health
- Clients present a combination of the following criteria whose severity would preclude treatment in less restrictive environment:
  - Impaired contact with reality manifested by hallucinations, delusions, or ideas of reference
  - Withdrawal, regression, or confusion not warranting inpatient hospitalization
  - Moderate to severe disabling depression
  - Moderate to severe disabling anxiety
  - Disabling somatic symptoms
  - Poor medication compliance
  - Inpatient care is not warranted
  - Poor socialization skills
  - Inappropriate attention-seeking behaviors
  - Poor interpersonal skills
  - Inadequate problem solving skills
  - In need of twenty-four (24) hour protective oversight and supervision in daily living

*Admission Prioritization* will be as follows:

- Any Chilton or Shelby county resident in a state hospital awaiting discharge
- Any Alabama resident awaiting discharge from a state hospital
- Any Chilton or Shelby county resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment
- Any Alabama resident who requires structured residential services to avoid admission to a state hospital or who needs more supervision than provided in their living environment

### **Continued Stay Criteria**

The initial individualized length of stay will be based on the resident's presenting needs as identified on the treatment plan but will not exceed one year. The Residential Services Level of Functioning will be utilized in determining the need for extending the length of stay past one year. At least one of the following must be met for continued stay:

- Continues to meet admission criteria
- Continues to exhibit an ability to respond positively to the treatment program and is motivated for continued treatment as evidenced by compliance with treatment plan and group home responsibilities

- Evidence of decompensation
- Medications have not reached therapeutic levels
- Progress has been made and a regression is anticipated if client is discharged to a less intense level of care

### **Transfer/Discharge Criteria**

At least one of the following must be met for transfer/discharge:

- Client no longer meets admission criteria or meets criteria for a more or less intense level of care
- Client has requested transfer to another service or level of care
- Client has achieved all treatment plan goals and is no longer in need of residential services

### **Exclusionary Criteria**

Exclusionary criteria for residential services include the following:

- Principal diagnosis of alcoholism or drug dependence
- Principal diagnosis of mental retardation
- Primary organic disorder
- Primary physical disorder (serious illness requiring hospital care, nursing care, home health care or impaired mobility that prohibits participation in program services)
- Resident poses a threat to the safety and welfare of other residents
- Exacerbation of symptomatology indicates that a more restrictive level of treatment would be more appropriate in meeting the individual's treatment needs.

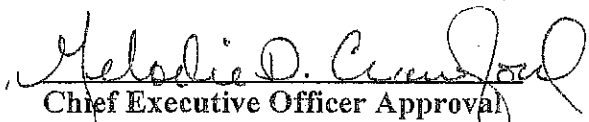
### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program coordinator with a master's degree in a mental health related field and two years experience in a direct service functional area. Group home manager with bachelor's degree with experience in residential settings. Technicians with high school diploma and appropriate experience. There will be one Bachelor's level manager and one mental health technician during the day. Two mental health technicians will be present during the evening hours and one awake mental health technician will be on duty during the midnight shift when clients are present. There will be a .25 aid/secretary available during the day.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

In Home Intervention for Adults

**Definition**

Time limited, home based services provided by a two person treatment team to diffuse an immediate crisis, stabilize the family unit or prevent out of home placement. The team members function interchangeably to provide treatment, rehabilitation and support. The team is the primary provider of services and is responsible for assisting clients in all aspects of community living. The majority of services occur in the community and/or in places where clients spend their time and are highly individualized both among individual clients and across time for each client. The active caseload for the team shall not exceed 20 clients.

**Location / Service Area**

Services will be provided to identified clients in the Chilton Shelby Mental Health Center service area of Chilton and Shelby Counties with emphasis placed in Shelby County. The In home Intervention Office is located at 2100 Shelby County Community Services Road in Pelham, Alabama but the majority of services will be provided in the client's home and community environments.

**Hours of Operation**

The In home Intervention team will provide services from 8:00 a.m. to 4:30 p.m. Monday through Friday, with hours varying as dictated by client need. Twenty-four (24) hour crisis response will be provided by existing on-call services. The hours of delivering the in home services shall be flexible to accommodate the scheduling demands and unique issues of the target population (before 8:00 a.m. and after 4:30 p.m. as needed).

**Program/Service Components**

Program services offered are highly individualized and may include any of the following key service functions:

- Intake/Assessment
- Individual Therapy
- Crisis Intervention (24 hour capability)
- Family Therapy
- Family Support and Education
- Case Management
- Medication Monitoring
- Mental Health Consultation
- Basic Living Skills

- In home Support (provision of services by the Bachelor's level team member when the Master's level therapist is absent.)
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following criteria are necessary for admission to In home Services:

- Client must be at least 18 years of age
- Client meets criteria for Serious Mental Illness
- Clearly documented need for more intensive outpatient support due to:
  - an increase in symptoms
  - transition from a more intensive level of care
  - need to defuse an immediate crisis situation
  - to stabilize the living arrangement and/or prevent out of home placement
  - a history of failure to engage in other outpatient services
- Client exhibits significant symptoms that interfere with the ability to function in more than one life area.
- Client has had two or more psychiatric hospitalizations in a state or local hospital within the 12 months
- Client is decompensating and is in danger of referral to state funded inpatient hospital without intervention of In home Treatment Services
- Client agrees to In home Intervention Services

### **Continued Stay Criteria**

Continued Stay is to be determined on an individual basis as indicated on the treatment plan. This determination is based on a monthly review of the treatment plan and all of the following must be met:

- Severity of illness and resulting impairment continues to require In home Intervention services
- Client continues to make progress and is compliant with the treatment plan
- There is reasonable likelihood of substantial benefit as a result of In home Intervention services
- In home Intervention services are the least restrictive service component

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge from In home Intervention services:

- The maximum benefits of the intensive in home service has been reached
- Client has met the treatment plan goals to the extent that the intensive in home therapy services are no longer needed
- Client no longer meets continued stay criteria and requires less or more intensive level of care
- Client is non-compliant with the treatment plan

- The client/family has not responded to repeated, documented follow up by the Intensive In home team during a 14 day period
- The Intensive In home team is unable to meet obvious, suspected, or expressed needs of the client and/or family system.
- The client becomes otherwise unavailable for services during a 14 day period

### **Exclusionary Criteria**

In home Intervention Services will not be provided if:

- Client is an imminent danger to self or others and will be transferred to a higher level of care based on client need
- Client has a primary diagnosis of substance abuse/use only
- Client exhibits such severity of symptoms and inadequacy of social support that treatment is required at a more intensive level of care

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

The In home Intervention Team is composed of a person with a master's degree in a mental health related field or a registered nurse and a person with a bachelor's degree. Each member of the adult team must have successfully completed a DMH approved Case Management program. Documentation should reflect that Intensive In home cases are staffed by the team on a regular basis and that joint decisions are made regarding the frequency of client contact for team and individual staff services.

Date of Board Approval: 10-20-10

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Mental Illness Division**

**Name of Program**

Family and Youth Intervention Junior Program

**Definition**

Comprehensive and structured services provided to Shelby County youth and their families. The services are directed towards eliminating or reducing psychiatric symptomatology and dysfunction from a Serious Emotional Disorder. The educational curriculum is provided during the academic school year by the Shelby County Board of Education and the program is registered with the State Department of Education. The educational curriculum is not provided during the summer months.

**Location**

Linda Nolen Learning Center at 2280 Highway 35 in Pelham, Alabama.

**Hours of Operation**

Monday through Friday from 7:30 a.m. until 2:30 p.m., hours may vary during school holidays and during the summer months. A minimum of three (3) hours non-educational, therapeutic service per day.

**Program/Service Components**

Program and services offered are based on client need and may include any of the following:

- Initial screening to evaluate the appropriateness of client participation
- Development of an individualized treatment plan
- Symptom/Medication Management and Education
- Social Skills Training that enhances family, social and community living skills
- Stress Management Training
- Leisure/Recreational Skills that enhance the use of leisure and play time
- Basic Living Skills Training that enhances personal care skills
- Group Therapy provided at a minimum of one half hour per week unless clinically contraindicated, group therapy size will not exceed ten
- Individual Therapy (individual or family therapy will be provided at a minimum of one half hour every two weeks)
- Family Therapy
- Family Education and Support regarding age related emotional and cognitive development and needs
- Therapeutic Field Trips
- Case Management Services
- Mental Health Consultation

- Psychiatric Assessment and Treatment provided by a licensed psychiatrist
- 24 Hour Crisis Intervention and Resolution Services
- Coordination with local Board of Education for educational needs
- Services for clients who are deaf or who have limited English proficiency will be offered by staff fluent in language of the client's choice or by using qualified interpreters. Services will be modified to effectively serve clients who are deaf as determined by a communication assessment conducted by the Office of Deaf Services or staff approved by the Office.

### **Admission Criteria**

The following criteria are necessary for admission:

- Between the ages of five (5) and eight (8) or in kindergarten through third grade
- Client and family are motivated and willing to participate in the program
- Have a diagnosed mental illness disorder (DSM-IV Axis I) and meet SED criteria
- Demonstrate a combination of at least five of the following whose severity would prevent treatment in a less restrictive environment:
  - Poor self control
  - Cruelty to animals
  - Inappropriate aggressive behavior
  - Angry/hostile temper tantrums
  - Hyperactivity
  - Withdrawn
  - Running away
  - Destructiveness
  - Poor school performance
  - Truancy
  - Defiance of authority
  - Manipulative behavior
  - Sexual maladjustment
  - Assaultive behavior
  - Child abuse victim
  - Depression
  - Anxiety
  - Homicidal/Suicidal ideation
  - Drug experimentation
  - Sexual abuse
  - Irrational fears
  - Attention seeking behavior
  - Encopretic/Enuretic
  - Low frustration tolerance
  - Inadequate social skills
  - Dysfunctional family relations
- Admission is approved by a staff member, who is a licensed physician, licensed psychologist, licensed certified social worker, licensed marriage and family therapist, a registered nurse with a master's degree in psychiatric nursing, certified registered nurse practitioner, licensed physician's assistant or a licensed professional counselor.
- Client shall have moderately disabling consistent and/or refractory symptoms with no significant clinical progress made or expected in a less intensive level of care.
- The program shall be reasonably expected to improve the client's symptoms, condition or functional level sufficient to permit transition to a less intensive level of care.



### **Continued Stay Criteria**

Expected length of treatment is approximately one academic year with determination for continuing services based on the participant's treatment needs. Treatment one academic year must be clinically justified by the Chief Operations Officer and not be extended more than four months per extension to achieve a clearly articulated clinical objective.

The following criteria must be met for continued stay:

- Goals and objectives specified on the treatment plan have not been substantially attained or new problems have emerged
- Further treatment can be reasonably expected to result in progress towards goals/objectives and/or continued stability
- Documentation that treatment cannot be provided in a less intensive level of care due to reasonable risk of relapse and/or hospitalization
- Clinical judgment indicates that an attempt to transition the client to a less intensive level of care is reasonably expected to result in the re-emergence of symptoms sufficient to meet admission criteria
- Continues to meet admission criteria
- Client and family exhibit an ability to respond positively to the treatment program and is motivated for continued treatment as evidenced by compliance with program rules and procedures
- Continued need to monitor for risk of harm to self or others
- Medications have not reached therapeutic levels

### **Transfer/Discharge Criteria**

At least one of the following must be met:

- Treatment goals and objectives have been substantially obtained and continued treatment can be provided in a less intensive level of care
- Client's degree of impairment, severity of symptoms and/or level of functioning necessitates admission to a more intensive level of care
- Client is unwilling or unable to participate in/benefit from the program due to severity of symptoms, functional impairments, behavioral problems, personal choice or cognitive limitations in spite of repeated efforts to engage the client
- The client's symptoms have reduced to the point that they no longer significantly impair social, vocational, or educational functioning

### **Exclusionary Criteria**

Exclusionary criteria for FYI program includes the following:

- The client is experiencing mild persistent chronic symptoms without acute exacerbation and less intensive levels of care can be reasonably expected to improve clients symptoms, condition and functional level
- The client has a medical condition which would obstruct or significantly interfere with regular activity participation
- The client is dangerous, assaultive, combative or poses a threat to the safety of the other participants
- Clients degree of impairment, severity of symptoms, and level of functioning require a more intensive level of care.

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program coordinator with a master's degree in a mental health related field and two years of direct mental illness service experience, one of which must be in services for children and adolescents. A master's level therapist and master's level State Certified Special Education Teacher (during the academic school year), who meets highly qualified standards. Overall staff to client ratio does not exceed 1 to 10. In physically isolated setting, there must be at least one other staff member present besides the coordinator or master's level clinician during hours of operation. All staff shall have specialized training/experience in working with children or shall receive supervision from a staff member who has specialized training/experience in working with children. Required experience is two (2) years supervised experience in working with children or two (2) specialized graduate courses related to working with children or twelve (12) CEU's of training/workshop in working with children.

Intellectual Disabilities Division  
Program Descriptions

**Program Description**

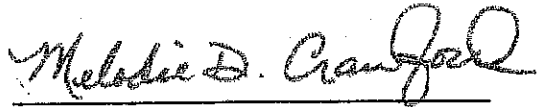
**Page Number**

Mitchell Center Day Hab  
Mitchell Center Workshop  
Case Management  
Carrie Gray Home  
Civitan Home

1-1b  
2-2a  
3-3a  
4-4b  
5-5b

Date of Board Approval: 9-12-07

Date of Revision: 6-10-9



Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Intellectual Disabilities Division**

**Name of Program**

Mitchell Center Day Hab

**Definition**

Mitchell Center Day Hab is a program for adult residents of Chilton and Shelby Counties with intellectual disabilities and/or developmental disabilities. Mitchell Center Day Hab provides services designed to assist individuals in acquiring, retaining, and improving their self-help, socialization and adaptive skills necessary to reside successfully in home and community based settings.

**Location**

The Mitchell Center Day Hab program is located at 67 County Road 67 in Calera, AL.

**Hours of Operation**

The program operates Monday through Friday from 9:00 a.m. to 2:00 pm., except on scheduled holidays.

**Program/Service Components**

The following services are provided within the program to facilitate acquisition and retention of

- Communication skills
- Sensory motor skills
- Personal skills
- Social skills
- Self help skills
- Assistance/training in daily living activities (laundry, shopping, meal planning, meal preparation, housekeeping, grooming and cleanliness)
- Social and adaptive skills building activities
- Recreation/leisure instruction
- Assisting clients to access public transportation

### **Admission Criteria**

Anyone enrolled in the Day Hab program must meet the following criteria:

- Eighteen (18) years of age or older
- Resident of Chilton or Shelby County
- Meets the AAMR definition of intellectual disabilities and the Federal definition of developmental disability
- Documentation of the following assessments have been completed within 90 days prior to admission and have been provided:
  - Standardized Intellectual Functioning Assessment
  - Adaptive Skills Assessment
  - Medical Evaluation by a licensed physician
  - Social, Developmental and Family History

### **Continued Stay Criteria**

Expected length of stay is determined by the client's identified human service needs.

The following criteria must be met for continued stay:

- Client maintains eligibility for program services in regard to admission criteria.
- Client agrees to participate in the Day Hab program
- Client continues to demonstrate unmet service needs as identified in the Hab Plan
- Services provided are considered to be the least restrictive setting for the client

### **Transfer/Discharge Criteria**

All of the following must be met for transfer/discharge:

- Clients who have achieved goals and objectives of the Hab Plan offered at Day Hab level of Training
- Client has demonstrated ability and willingness to progress into another level of training
- Client refuses to participate in Day Hab program

### **Exclusionary Criteria**

Exclusionary criteria for the Day Hab program includes the following:

- Client does not meet AAMR definition of intellectual disabilities or the Federal definition for developmental disability

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program is clinically supervised by the Division Director who has a master's degree in a field of study appropriate for the division, two years post graduate experience and is designated as a QMRP by the Department of Mental Health. The Program Coordinator who has completed two years of college and has at least five years of experience working with individuals who have intellectual disabilities and/or developmental disabilities. Mental Health Technicians with at least a high school diploma and a minimum of one year experience in the field and Mental Health Worker I's who have a high school diploma provide instruction and training for developing identified skills.

Date of Board Approval: 9-12-07

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Intellectual Disabilities Division**

**Name of Program**

Mitchell Center Workshop

**Definition**

Mitchell Center Workshop is a sheltered work center for adults with intellectual disabilities and/or developmental disabilities. Mitchell Center Workshop provides services aimed at preparing individuals for paid or unpaid employment but which are not job task oriented. The Workshop clients are paid a sub-minimum wage based on Department of Labor Sheltered Workshop Certificate. Contracts for piece rate work are developed for on-site training. Some contracts are developed for off site training including housekeeping, grounds keeping and custodial programs.

**Location**

The Mitchell Center Workshop program is located at 67 County Road 67 in Calera, AL.

**Hours of Operation**

The program operates Monday through Friday from 9:00 a.m. to 2:00 p.m., except on scheduled holidays.

**Program/Service Components**

The following services are provided based on individual client needs.

- Training and skill development focused on:
  - Compliance
  - Attending to task
  - Task completion
  - Problem solving
  - Safety
  - Increased fine motor skills
  - Ability to discriminate accuracy of work
  - Appropriate social skills
  - Appropriate grooming skills
  - Endurance
  - Economic self-sufficiency
  - Self direction
- Assisting clients to access public transportation

### **Admission Criteria**

Admission criteria includes the following:

- Twenty-one (21) years of age or older
- Resident of Chilton or Shelby County
- Meets the AAMR definition of intellectual disabilities and the Federal definition of developmental disability
- Demonstrate willingness to work at a wage determined by a time study that will be less than minimum wage
- Indicate an interest in pursuing vocational skills training which may lead to gainful employment
- Provide documentation that the service is not otherwise available under a program funded under the Rehabilitation Act of 1973 or P.L. 94-142

### **Continued Stay Criteria**

The following criteria must be met for continued stay:

- Client continues to meet admission criteria
- Client agrees to participate in the Workshop program
- Client continues to demonstrate needs in job skills training development
- Client unable to succeed in less restricted environment

### **Transfer/Discharge Criteria**

All of the following must be met for transfer/discharge:

- Clients demonstrates need for alternative training environment (either more or less restrictive)
- Client unwilling to participate in Workshop program

### **Exclusionary Criteria**

Exclusionary criteria for the Workshop program includes the following:

- Client qualifies for services that are available and funded under the Rehabilitation Act of 1973 or P.L. 94-142

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program is clinically supervised by the Division Director who has a master's degree in a field of study appropriate for the division, two years post graduate experience and is designated as a QMRP by the Department of Mental Health.

The Program Coordinator who has completed two years of college and has at least five years of experience working with individuals who have intellectual disabilities and/or developmental disabilities. Two job coaches with a high school diploma provide instruction and training for developing identified job training skills.



Date of Board Approval: 01-09-02

Date of Revision: 6-10-09



Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Intellectual Disabilities Division**

**Name of Program**

Case Management

**Definition**

Services designed to link clients with necessary community support systems and advocacy when the client or family member is unable to do so.

**Location**

Case management services are typically provided in the community setting.

**Hours of Operation**

Monday through Friday, 8:00 a.m. until 4:30 p.m. with after hour's services available as needed.

**Program/Service Components**

Services provided are based upon client need and may include any of the following:

- Systematic evaluation/reevaluation of client human service needs and development of written plan of care
- Linkage and service arrangement to community services
- Assistance through crisis situations
- Arrange to meet transportation needs
- Advocacy
- Monitoring clients access to, linkage with, and usage of community support

**Admission Criteria**

The following criteria must be met for admission:

- The client meets the AAMR definition of intellectual disabilities and/or
- The client meets the Federal DD definition for developmental disabilities
- The client is a resident of Chilton or Shelby County
- Client has human service needs as identified in the SUN-R Needs Assessment
- Client is willing to participate in case management services

### **Continued Stay Criteria**

Expected length of stay is determined by client human service needs. The following criteria must be met for continued stay:

- Client continues to have unmet human service needs as identified on the SUN-R Needs Assessment
- Client continues to agree to participate in case management services

### **Transfer/Discharge Criteria**

The following criteria must be met for transfer/discharge:

- The SUN-R Needs Assessment has no human service needs identified
- Client refuses to participate in case management services
- Client is unable to benefit from case management services

### **Exclusionary Criteria**

Exclusionary criteria for case management services includes the following:

- There are no identified human service needs on the SUN-R Needs Assessment
- Client does not meet AAMR definition of intellectual disabilities or the Federal DD definition for developmental disabilities

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program is clinically supervised by a master's level staff with two (2) year's post master's experience, who is designated as a QMRP by the Department of Mental Health and who has completed a DMH. approved case management training; bachelor's level staff who have completed a DMH approved case management training program and possess a valid driver's license.

Date of Board Approval: 01-09-02

Date of Revision: 6-10-09

*Melodie D. Crawford*

Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Intellectual Disabilities Division**

**Name of Program**

Carrie Gray Home

**Definition**

Residential services are offered to residents of Chilton or Shelby Counties who are diagnosed with intellectual disabilities in a habilitative milieu. The services are designed to provide intensive habilitation training in order to enable the client to reach his/her maximum potential which would allow him/her to function and live in the least restrictive setting.

**Location**

The Carrie Gray Home is located at 783 County Road 418 in Clanton, Alabama.

**Hours of Operation**

Group homes operate twenty-four (24) hours a day, seven (7) days a week.

**Program/Service Components**

Services provided depend upon individual client need but may include the following:

- Housing
- Nutritious meals and snacks
- Medication management
- Transportation services.
- Basic living skills training.
- Social skills training
- Education regarding psychiatric illness
- Family support and education
- Community Living
- Recreational activities
- Assistance with accessing the following services:
  - Mental Health services including case management services
  - Medical and dental services
  - Hearing and vision services
  - Educational services
  - Pre-vocational services
  - Day Hab Services
  - Job Training Program
  - Community resources and services
  - Applying for benefits

### **Admission Criteria**

The following are criteria for admission to residential services:

- 18 years of age or older
- Have treatment needs that can be met through residential services
- Residential services are the least restrictive level of treatment available
- Willing to participate in daily activities as outlined in the plan of care
- Meet the definition of Intellectual disabilities and the Federal definition of developmental disability as written in the Minimum Standard for Community Programs Serving Individuals Who are Intellectual Disabled and Developmentally Disabled (Revised 9/92) criteria for Serious Mental Illness as defined by the Alabama Department of Mental Health
- The Adaptive Behavior Scale (AAMD, 1974) is required assess the functioning level of clients in the (10) behavioral domain: also, social and family history.
- A medical evaluation by a licensed physician; a social, developmental and family history; all must be completed 90 days prior to admission

### **Continued Stay Criteria**

An individualized expected length of stay will be established for each resident residing in the group homes. The initial individualized length of stay will be based on the resident's presenting needs.

Criteria for continued stay includes:

- Eligibility is re-determined quarterly and annually according to funding source requirements
- Client is in agreement to remain in residential placement
- Client manifests symptoms/behaviors that previously led to hospitalization and/or has developed symptoms that interfere with the ability to cope with daily situations
- Needs further regulation of medication under close supervision
- Exhibits inadequate basic living skills required for functioning in a less restrictive setting
- Exhibits social behaviors and/or impaired social skills that interfere with the clients ability to function in a less restrictive setting
- Progress has been made and a regression is anticipated if client is discharged to a less intense level of care

### **Transfer/Discharge Criteria**

At least one of the following must be met for transfer/discharge:

- Client no longer meets admission criteria or meets criteria for a more or less intense level of care
- Client has requested transfer to another service or level of care
- Client has achieved all Hab Plan goals and is no longer in need of residential services

### **Exclusionary Criteria**

Exclusionary criteria for residential services include the following:

- Principal diagnosis of alcoholism or drug dependence

- Primary physical disorder (serious illness requiring hospital care, nursing care, home health care)
- Resident poses a threat to the safety and welfare of other residents
- Exacerbation of symptomatology indicates that a more restrictive level of treatment would be more appropriate in meeting the individual's treatment needs

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

The program will have a part-time QMRP who is a human services professional with at least one year of experience working with persons who are mentally retarded or developmentally disabled and who has demonstrated knowledge of the habilitation process. A Group Home Manager with a high school education and a valid driver's license, with at least one year direct service in working with the Intellectual disabilities population, preferably in a residential setting. Technicians with high school diploma and at least one year of residential experience. Mental health worker I's with high school diploma. Each group home will have two (2) of the above staff in each home during the day and evening hours that clients are present and one (1) awake staff in each home during the midnight shift. Additionally there will be an emergency on-call staff person available at all times.

Date of Board Approval: 01-09-02

Date of Revision: 6-10-09

*Melodie D. Cranford*

Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Intellectual Disabilities Division**

**Name of Program**

Civitan Home

**Definition**

Residential services are offered to residents of Chilton or Shelby county who are diagnosed with intellectual disabilities in a habilitative milieu. The services are designed to provide intensive habilitation training in order to enable the client to reach his/her maximum potential which would allow him/her to function and live in the least restrictive setting.

**Location**

The Civitan Home is located at 203 Eighth Street North in Clanton, Alabama.

**Hours of Operation**

Group homes operate twenty-four (24) hours a day, seven (7) days a week.

**Program/Service Components**

Services provided depend upon individual client need but may include the following:

- Housing
- Nutritious meals and snacks
- Medication management
- Transportation services.
- Basic living skills training.
- Social skills training
- Education regarding psychiatric illness
- Family support and education
- Community Living
- Recreational activities
- Assistance with accessing the following services:
  - Mental Health services including case management services
  - Medical and dental services
  - Hearing and vision services
  - Educational services
  - Pre-vocational services
  - Day Hab Services
  - Job Training Program
  - Community resources and services
  - Applying for benefits

### **Admission Criteria**

The following are criteria for admission to residential services:

- 18 years of age or older
- Have treatment needs that can be met through residential services
- Residential services are the least restrictive level of treatment available
- Willing to participate in daily activities as outlined in the plan of care
- Meet the definition of Intellectual disabilities and the Federal definition of developmental disability as written in the Minimum Standard for Community Programs Serving Individuals Who are Intellectual Disabled and Developmentally Disabled (Revised 9/92) criteria for Serious Mental Illness as defined by the Alabama Department of Mental Health
- The Adaptive Behavior Scale (AAMD, 1974) is required assess the functioning level of clients in the (10) behavioral domain: also, social and family history.
- A medical evaluation by a licensed physician; a social, developmental and family history; all must be completed 90 days prior to admission

### **Continued Stay Criteria**

An individualized expected length of stay will be established for each resident residing in the group homes. The initial individualized length of stay will be based on the resident's presenting needs.

Criteria for continued stay includes:

- Eligibility is re-determined quarterly and annually according to funding source requirements
- Client is in agreement to remain in residential placement
- Client manifests symptoms/behaviors that previously led to hospitalization and/or has developed symptoms that interfere with the ability to cope with daily situations
- Needs further regulation of medication under close supervision
- Exhibits inadequate basic living skills required for functioning in a less restrictive setting
- Exhibits social behaviors and/or impaired social skills that interfere with the clients ability to function in a less restrictive setting
- Progress has been made and a regression is anticipated if client is discharged to a less intense level of care

### **Transfer/Discharge Criteria**

At least one of the following must be met for transfer/discharge:

- Client no longer meets admission criteria or meets criteria for a more or less intense level of care
- Client has requested transfer to another service or level of care
- Client has achieved all Hab Plan goals and is no longer in need of residential services

### **Exclusionary Criteria**

Exclusionary criteria for residential services include the following:

- Principal diagnosis of alcoholism or drug dependence

- Primary physical disorder (serious illness requiring hospital care, nursing care, home health care)
- Resident poses a threat to the safety and welfare of other residents
- Exacerbation of symptomatology indicates that a more restrictive level of treatment would be more appropriate in meeting the individual's treatment needs

#### Appeal Process

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

#### Staffing

The program will have a part-time QMRP who is a human services professional with at least one year of experience working with persons who are mentally retarded or developmentally disabled and who has demonstrated knowledge of the habilitation process. A Group Home Manager with a high school education and a valid driver's license, with at least one year direct service in working with the Intellectual disabilities population, preferably in a residential setting. Technicians with a high school diploma and at least one year of residential experience. Mental health worker I's with high school diploma. Each group home will have two (2) of the above staff in each home during the day and evening hours that clients are present and one (1) awake staff in each home during the midnight shift. Additionally there will be an emergency on-call staff person available at all times.



Substance Abuse Division  
Program Descriptions

<b>Program Description</b>	<b>Page Number</b>
Shelby County Adolescent Intensive Outpatient Program	1-1a
Shelby County Jail Adult Intensive Outpatient Program	2-2a
Shelby County Adult Intensive Outpatient Program	3-3a
Prevention Services	4-4a
Chilton County Adult Intensive Outpatient Program	5-5a
Chilton County Adolescent Intensive Outpatient Program	6-6a
Case Management	7-7a

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Shelby County Adolescent Intensive Outpatient Program

**Definition**

Time limited, goal oriented rehabilitation services in an outpatient setting designed to assist adolescent clients in reaching and maintaining a substance free lifestyle.

**Location**

Shelby County Adolescent Intensive Outpatient Program is located at 3156 Pelham Parkway, Suite 4 in Pelham, Alabama.

**Hours of Operation**

Regular office hours are between 8:00 a.m. and 4:30 p.m., Monday through Friday. Intensive Outpatient Programs operate Tuesday, Wednesday and Thursday nights between 5:30 p.m. and 8:00 p.m. Family night is held on Thursday night.

**Program/Service Components**

The focus of services is comprehensive and based on client needs. The following services are available:

- Assessment and Referral
- Individual Therapy
- Family Therapy
- Group Therapy
- Didactic Education
- Random Drug Screening
- Continuing Care
- Follow Up Contact

**Admission Criteria**

The following criteria are necessary for admission:

- Client meets criteria for a diagnostic impression of substance abuse or dependence
- Client must be able to benefit from outpatient services
- Client must demonstrate desire and ability to be involved in the program and assume responsibility for behavior change
- Family must express a willingness to participate in the client's care

A waiting list may be created if there are requests for services when the program is functioning at capacity. The waiting list priority will be based on the dated and time of the request for services. When a vacancy becomes available the person who requested services first will be contacted and contacts continue down the waiting list until all vacancies are filled.

### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Client needs can be met by this level of service
- Client continues to work toward individualized, appropriate and specific goals
- Client must respond positively to the program as evidenced by compliance with rules and regulations

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client has successfully completed the program
- Client needs can be met by a lower level of care or a need for a higher level of care is evident
- Client is unwilling to comply with program requirements and expectations or fails to make progress towards goals

### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Client is a danger to self or others
- Client exhibits severe behaviors which would negatively impact on other clients in the group
- Client has a history of uncooperative behavior and multiple failed treatments

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a compliant or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Assessments are performed by a master's level therapist who has two or more years of experience in the substance abuse field. Treatment planning and counseling may be provided by a person with a clinical master's degree or bachelor's degree with monthly documented supervision.

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Shelby County Jail Adult Intensive Outpatient Program

**Definition**

Time limited, goal oriented rehabilitation services in an outpatient setting designed to assist adult clients in reaching and maintaining a substance free lifestyle.

**Location**

Shelby County Adult Intensive Outpatient Program is offered to inmates in the Shelby County Jail in Columbiana, Alabama.

**Hours of Operation**

Services are offered on Tuesday and Thursday from 12:30 p.m. until 2:30 p.m.

**Program/Service Components**

The focus of services is comprehensive and based on client needs. The following services are available:

- Assessment and Referral
- Individual Therapy
- Family Therapy
- Group Therapy
- Didactic Education

**Admission Criteria**

The following criteria are necessary for admission:

- Space must be available in the program
- Client meets criteria for a diagnostic impression of substance abuse or dependence
- Client must be able to benefit from outpatient services
- Client must demonstrate desire and ability to be involved in the program and assume responsibility for behavior change

A waiting list may be created if there are requests for services when the program is functioning at capacity. The waiting list priority will be based on the dated and time of the request for services. When a vacancy becomes available the person who requested services first will be contacted and contacts continue down the waiting list until all vacancies are filled.

### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Client needs can be met by this level of service
- Client continues to work toward individualized, appropriate and specific goals
- Client must respond positively to the program as evidenced by compliance with rules and regulations

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client has successfully completed the program
- Client is unwilling to comply with program requirements and expectations or fails to make progress towards goals
- Client is transferred from Shelby County jail or discharged from jail (if discharged client may be referred to an outpatient program is appropriate)

### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Client is a danger to self or others
- Client exhibits severe behaviors which would negatively impact on other clients in the group
- Client has a history of uncooperative behavior and multiple failed treatments

### **Appeal Process**

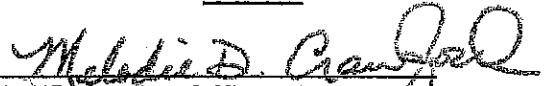
Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Assessments are performed by a master's level therapist who has two or more years of experience in the substance abuse field. Treatment planning and counseling may be provided by a person with a clinical master's degree or bachelor's degree with monthly documented supervision.

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Shelby County Adult Intensive Outpatient Program

**Definition**

Time limited, goal oriented rehabilitation services in an outpatient setting designed to assist adult clients in reaching and maintaining a substance free lifestyle.

**Location**

Shelby County Adult Intensive Outpatient Program is located at 3156 Pelham Parkway, Suite 4 in Pelham, Alabama.

**Hours of Operation**

Regular office hours are between 8:00 a.m. and 4:30 p.m., Monday through Friday. Intensive Outpatient Programs operate Wednesday and Thursday from 9:00 a.m. until 11:30 a.m. and Tuesday, Wednesday and Thursday nights between 5:00 p.m. and 7:30 p.m.

**Program/Service Components**

The focus of services is comprehensive and based on client needs. The following services are available:

- Assessment and Referral
- Individual Therapy
- Family Therapy
- Group Therapy
- Didactic Education
- Random Drug Screening
- Continuing Care
- Follow Up Contact

**Admission Criteria**

The following criteria are necessary for admission:

- Client meets criteria for a diagnostic impression of substance abuse or dependence
- Client must be able to benefit from outpatient services
- Client must demonstrate desire and ability to be involved in the program and assume responsibility for behavior change

A waiting list may be created if there are requests for services when the program is functioning at capacity. The waiting list priority will be based on the dated and time of the request for services. When a vacancy becomes available the person who requested services first will be contacted and contacts continue down the waiting list until all vacancies are filled.

#### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Client needs can be met by this level of service
- Client continues to work toward individualized, appropriate and specific goals
- Client must respond positively to the program as evidenced by compliance with rules and regulations

#### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client has successfully completed the program
- Client needs can be met by a lower level of care or a need for a higher level of care is evident
- Client is unwilling to comply with program requirements and expectations or fails to make progress towards goals

#### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Client is a danger to self or others
- Client exhibits severe behaviors which would negatively impact on other clients in the group
- Client has a history of uncooperative behavior and multiple failed treatments

#### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

#### **Staffing**

Assessments are performed by a master's level therapist who has two or more years of experience in the substance abuse field. Treatment planning and counseling may be provided by a person with a clinical master's degree or bachelor's degree with monthly documented supervision.

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

*Melanie D. Crawford*

Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Prevention Services

**Definition**

Education service aimed at decreasing the risk of alcohol, drug abuse and other related behavior problems in children and adolescents.

**Location**

Prevention Services are provided in area schools, alternative programs, residential facilities, and Head Start Centers in Chilton and Shelby Counties. Summer day camps may be provided in local state parks and other camp facilities.

**Hours of Operation**

Hours are varied depending on location of services and time of year services are provided.

**Program/Service Components**

Services are focused on children and adolescents who are at "high risk" for alcohol, drug abuse and for other behaviors which could cause significant life problems. The following services are available:

- Crime Reduction Training
- Anger Reduction Training
- Refusal Skills Training
- AIDS Awareness
- Violence Prevention
- Conflict Resolution
- Self Esteem Building
- Socialization Skills
- Life Skills

**Admission Criteria**

The following criteria are necessary for admission to Prevention Services:

- Client is at least 4 years of age
- Client must be enrolled in a school based program or alternative program
- Referred by the school counselor, residential manager or Juvenile Probation officer or be included in a presentation for an entire classroom



### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Client needs can be met by this level of service
- Client responds positively to the program as evidenced by compliance with rules and regulations

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client completes the program
- Referral source removes client from the program
- Client is unwilling to comply with program requirements

### **Exclusionary Criteria**

Services will not be provided if:

- Client is a danger to self or others
- Client exhibits severe behaviors which would negatively impact on other clients in the group
- Client is unwilling to comply with program requirements and expectations
- Client is involved in Substance Abuse treatment

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Prevention Coordinator must have a master's degree in a human services field and two years experience, one year in substance abuse prevention or complete one prevention course. Other prevention staff must have a bachelor's degree or two years of college or two years of substance abuse experience. All staff must complete required certification training within one year of employment.

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Chilton County Adult Intensive Outpatient Program

**Definition**

Time limited, goal oriented rehabilitation services in an outpatient setting designed to assist adult consumers in reaching and maintaining a substance free lifestyle.

**Location**

Chilton County Adult Intensive Outpatient Program is located at 110 Medical Center Drive in Clanton, Alabama.

**Hours of Operation**

Regular office hours are between 8:00 a.m. and 4:30 p.m., Monday through Friday. Intensive Outpatient Programs operate Tuesday, Wednesday and Thursday nights between 5:00 p.m. and 7:30 p.m.

**Program/Service Components**

The focus of services is comprehensive and based on consumer needs. The following services are available:

- Assessment and Referral
- Individual Therapy
- Family Therapy
- Group Therapy
- Didactic Education
- Random Drug Screening
- Continuing Care
- Follow Up Contact

**Admission Criteria**

The following criteria are necessary for admission:

- Consumer meets criteria for a diagnostic impression of substance abuse or dependence
- Consumer must be able to benefit from outpatient services
- Consumer must demonstrate desire and ability to be involved in the program and assume responsibility for behavior change

A waiting list may be created if there are requests for services when the program is functioning at capacity. The waiting list priority will be based on the date and time of the request for services. When a vacancy becomes available the person who requested services first will be contacted and contacts continue down the waiting list until all vacancies are filled.

### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Consumer needs can be met by this level of service
- Consumer continues to work toward individualized, appropriate and specific goals
- Consumer must respond positively to the program as evidenced by compliance with rules and regulations

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Consumer has successfully completed the program
- Consumer needs can be met by a lower level of care or a need for a higher level of care is evident
- Consumer is unwilling to comply with program requirements and expectations or fails to make progress towards goals

### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Consumer is a danger to self or others
- Consumer exhibits severe behaviors which would negatively impact on other consumers in the group
- Consumer has a history of uncooperative behavior and multiple failed treatments

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Assessments are performed by a master's level therapist who has two or more years of experience in the substance abuse field. Treatment planning and counseling may be provided by a person with a clinical master's degree or bachelor's degree with monthly documented supervision.

Date of Board Approval: 8-14-02

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Division**

**Name of Program**

Chilton County Adolescent Intensive Outpatient Program

**Definition**

Time limited, goal oriented rehabilitation services in an outpatient setting designed to assist adolescent clients in reaching and maintaining a substance free lifestyle.

**Location**

Chilton County Adolescent Intensive Outpatient Program is located at 110 Medical Center Drive in Clanton, Alabama.

**Hours of Operation**

Regular office hours are between 8:00 a.m. and 4:30 p.m., Monday through Friday. Intensive Outpatient Programs operate Monday and Thursday nights between 5:00 p.m. and 7:30 p.m.

**Program/Service Components**

The focus of services is comprehensive and based on client needs. The following services are available:

- Assessment and Referral
- Individual Therapy
- Family Therapy
- Group Therapy
- Didactic Education
- Follow Up Contact

**Admission Criteria**

The following criteria are necessary for admission:

- Client meets criteria for a diagnostic impression of substance abuse or dependence
- Client must be able to benefit from outpatient services
- Client must demonstrate desire and ability to be involved in the program and assume responsibility for behavior change
- Family must express a willingness to participate in the client's care

A waiting list may be created if there are requests for services when the program is functioning at capacity. The waiting list priority will be based on the date and time of the request for services. When a vacancy becomes available the person who requested services first will be contacted and contacts continue down the waiting list until all vacancies are filled.

#### **Continued Stay Criteria**

The following criteria are necessary for continued stay:

- Client needs can be met by this level of service
- Client continues to work toward individualized, appropriate and specific goals
- Client must respond positively to the program as evidenced by compliance with rules and regulations

#### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- Client has successfully completed the program
- Client needs can be met by a lower level of care or a need for a higher level of care is evident
- Client is unwilling to comply with program requirements and expectations or fails to make progress towards goals

#### **Exclusionary Criteria**

Outpatient services will not be provided if:

- Client is a danger to self or others
- Client exhibits severe behaviors which would negatively impact on other clients in the group
- Client has a history of uncooperative behavior and multiple failed treatments

#### **Appeal Process**

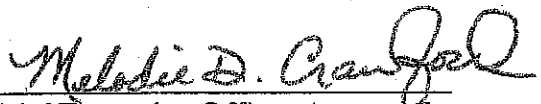
Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

#### **Staffing**

Assessments are performed by a master's level therapist who has two or more years of experience in the substance abuse field. Treatment planning and counseling may be provided by a person with a clinical master's degree or bachelor's degree with monthly documented supervision.

Date of Board Approval: 7-8-09

Date of Revision: 6-10-09

  
Chief Executive Officer Approval

**Chilton Shelby Mental Health Center  
Substance Abuse Program**

**Name of Program**

Case Management

**Definition**

A client centered strategy for engaging adults and adolescents who are diagnosed with substance abuse or substance dependency and in some cases are mentally ill with necessary community support systems and services in order to enhance the recovery process and to promote sober community living.

**Location**

Pelham Adult and Adolescent Intensive Outpatient Programs.

Clanton Adult and Adolescent Intensive Outpatient Programs.

Case management services will typically be provided in the community setting.

**Hours of Operation**

Services are provided from 8:00 a.m. until 4:30 p.m., Monday through Friday with after hours services available to meet client population needs.

**Program/Service Components**

Services provided are based upon client need and may include any of the following:

- Systematic evaluation/reevaluation of client human service needs
- Case Planning based on significant problems that the client is experiencing as identified in the Human Needs Assessment
- Linkage and service arrangement to community services
- Assistance through crisis situations
- Arrange to meet transportation needs
- Advocacy
- Monitoring client's access to, linkage with, and usage of community support
- Human Services Needs Assessment will be updated whenever there are significant changes to the key elements and reevaluated every 12 months as long as case is active
- Case Plan will be reviewed and updated every 90 days with a written assessment of client's progress, or lack thereof, which are related to each of the problems/goals

### **Admission Criteria**

The following criteria are necessary for admission:

- Client must meet criteria for a diagnostic impression of substance abuse or dependence
- Resident of Chilton or Shelby County
- Client has human service needs as identified in the Human Services Needs Assessment
- Client willing to participate in case management services
- Client has an open clinical record with Chilton Shelby Mental Health Center Substance Abuse Division unless approved by the Chief Operations Officer.

### **Continued Stay Criteria**

Expected length of stay is determined by client human service needs. The following criteria must be met for continued stay:

- Client continues to have unmet human service needs as identified on the Human Service Needs Assessment
- Client continues to agree to participate in case management services
- Client has an open clinical record with Chilton Shelby Mental Health Center Substance Abuse Division unless approved by the Chief Operations Officer

### **Transfer/Discharge Criteria**

At least one of the following criteria must be met for transfer/discharge:

- The agreed upon goals of the Human Services Needs Assessment / Case Plan have been met
- Client is not enrolled in Chilton Shelby Mental Health Center Substance Abuse Division
- Client refuses to participate in case management services
- Client is unable to benefit from case management services

### **Exclusionary Criteria**

Exclusionary criteria for case management services include the following:

- There are no identified human service needs on the Human Services Needs Assessment.

### **Appeal Process**

Any person who does not agree with a decision regarding admission, continued stay, transfer, discharge or exclusion to the program may file a complaint or grievance by following the established Complaint/Grievance policy and procedure.

### **Staffing**

Program is clinically supervised by a staff member who has, at a minimum, a Master's level degree in mental health or a related field and two (2) year's post Master's experience, who has completed an approved DMH case management training; or a staff member who has a Master's degree and has two years of experience as a case manager regardless of whether the experience occurred pre- or post-Master's degree, and has completed DMH approved case management training. Case management services will be provided by staff who have a master's degree in a mental health related field and have completed a DMH approved Case Management Training Program or have two years experience as a case manager regardless of whether it occurred at the bachelor or graduate level and possess a valid Alabama driver's license.